

Passion for Innovation.
Compassion for Patients.™



Decalogue Survey PAN European Results



May 2025

Methodology

Online Survey

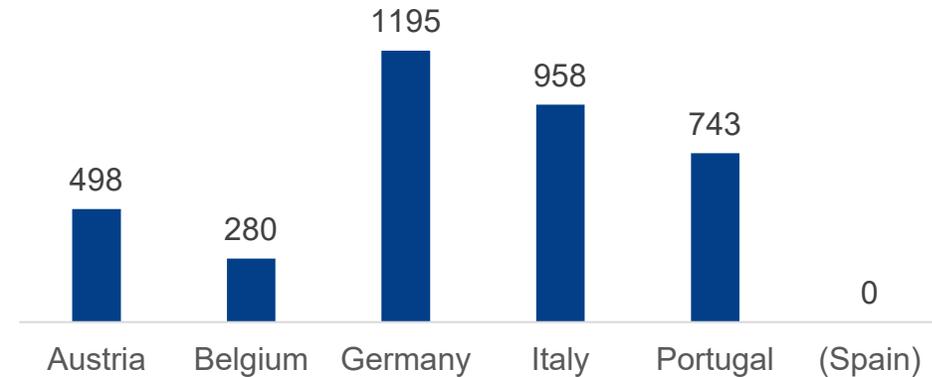
Field time: 25/03/2025 – 14/04/2025

Key markets: Austria, Belgium, Germany, Italy, Portugal, Spain (general public only)

Target groups: CVD patients; General public

Respondents: 3,674 patients; 4,906 general public

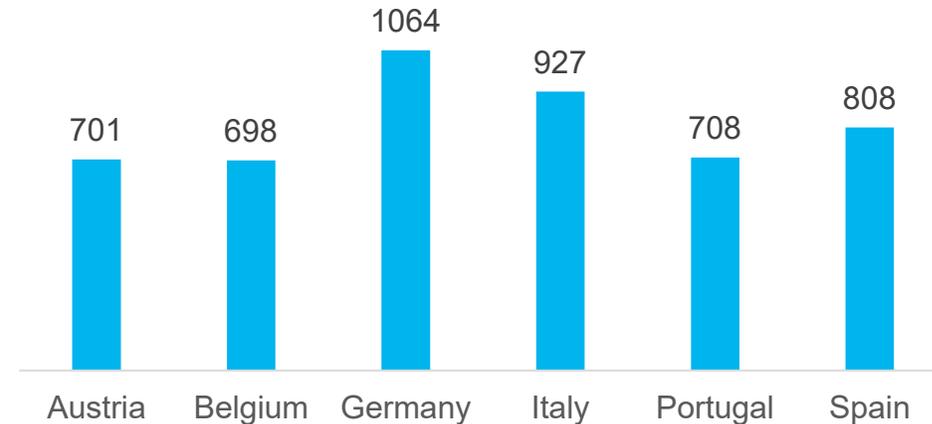
Number of respondents per market - patients



Definition of patients by pre-existing conditions:

- Diabetes
- Heart conditions (not heart failure)
- Hypertension
- Cardiovascular disease
- Obesity
- Substance abuse – drugs/alcohol
- Arrhythmia /Atrial Fibrillation
- Blood disorders (non cancerous)
- Heart Failure
- High Cholesterol
- Leukemia
- Stroke
- Heart Murmur
- Heart Attack
- Heart burn

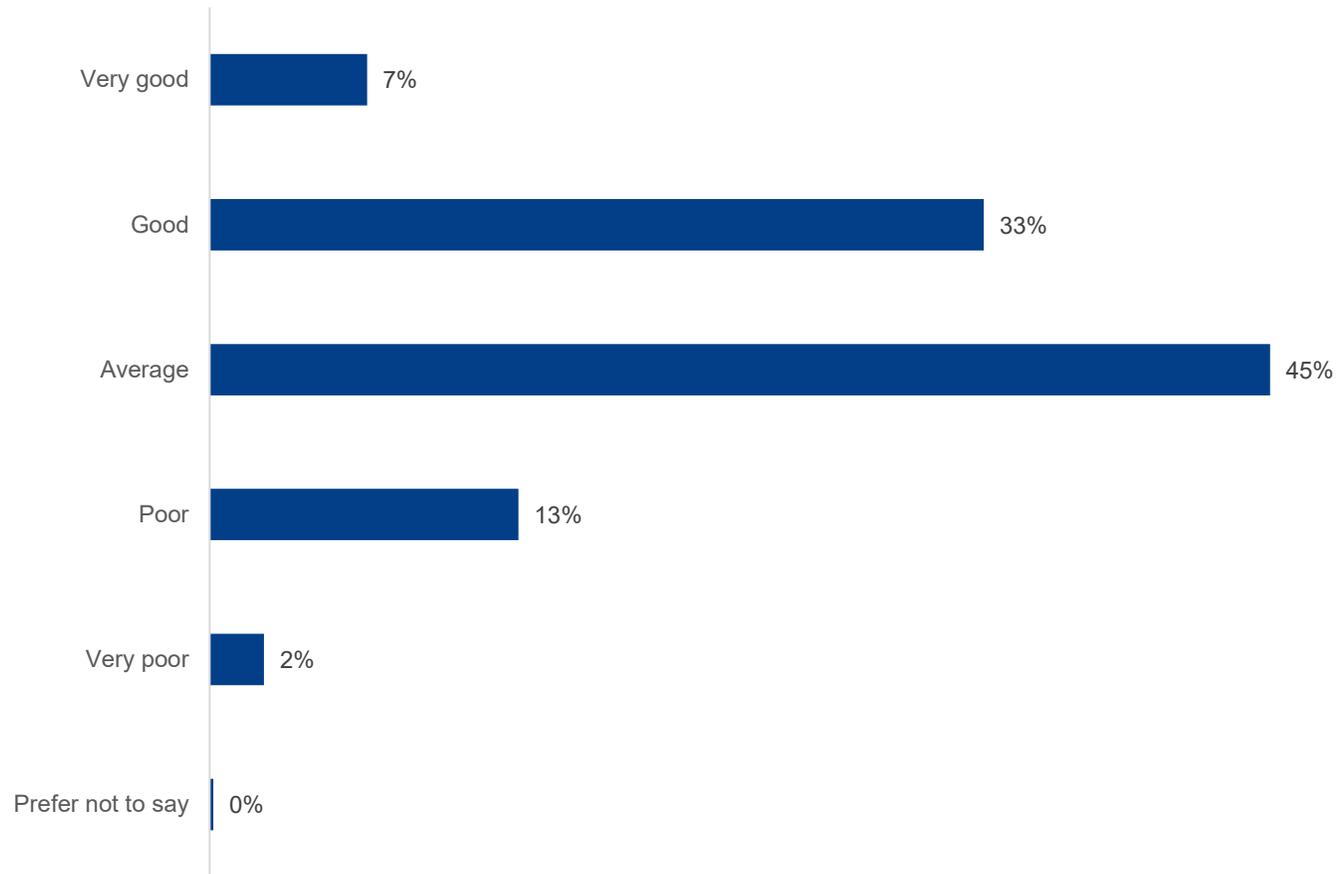
Number of respondents per market - General Public



Patients

4 out of 10 patients rate their health as average to good

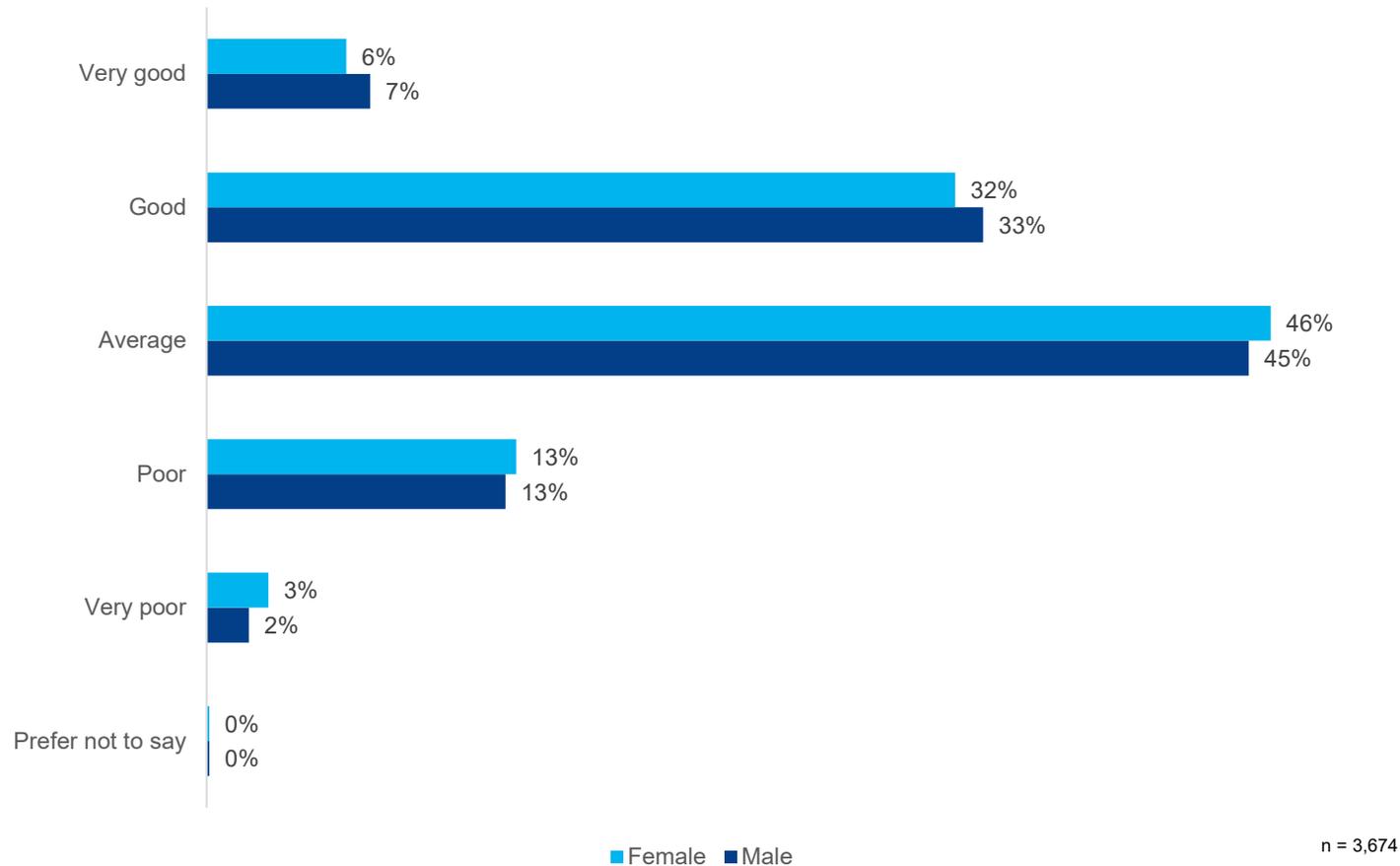
Q6. How would you describe your overall health?



- **40%** of patients consider themselves to be in **good or very good health** (**33%** good, **7%** very good).
- **15%** of patients describe their health as **poor or very poor**, with only **2%** in the very poor category.
- **Almost half (45%)** rate their health as average, **reflecting a moderate overall perception of wellbeing.**

Just under half of both men and women describe their health as average

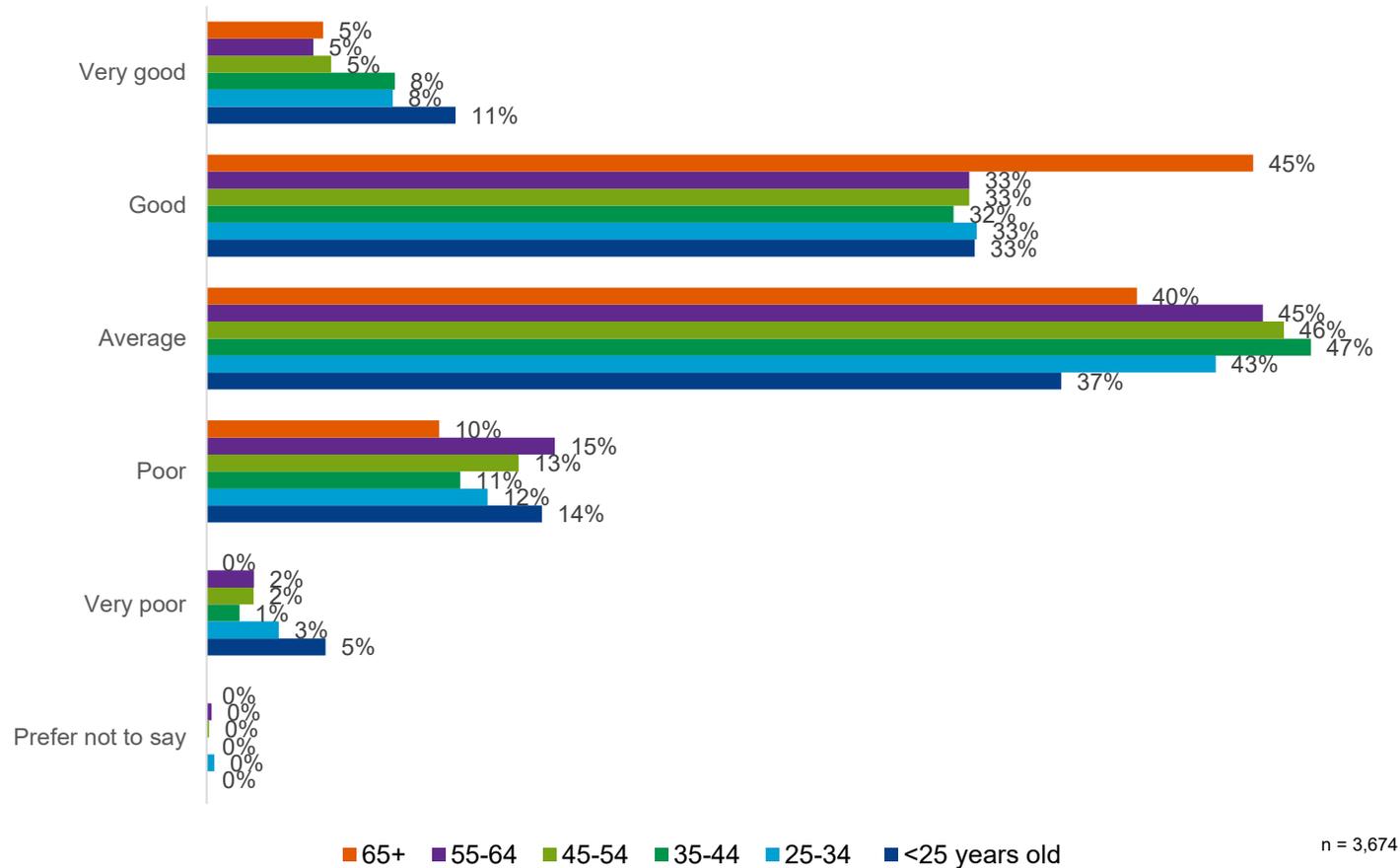
Q6. How would you describe your overall health?



- **46%** of **women** and **45%** of **men** describe their overall health as average.
- About **one-third in both groups** report good health (**32%** women, **33%** men).
- Poor or very poor ratings **remain low and identical across genders** (**13%** poor; **~3%** very poor).

The majority across all age groups describe their health as average

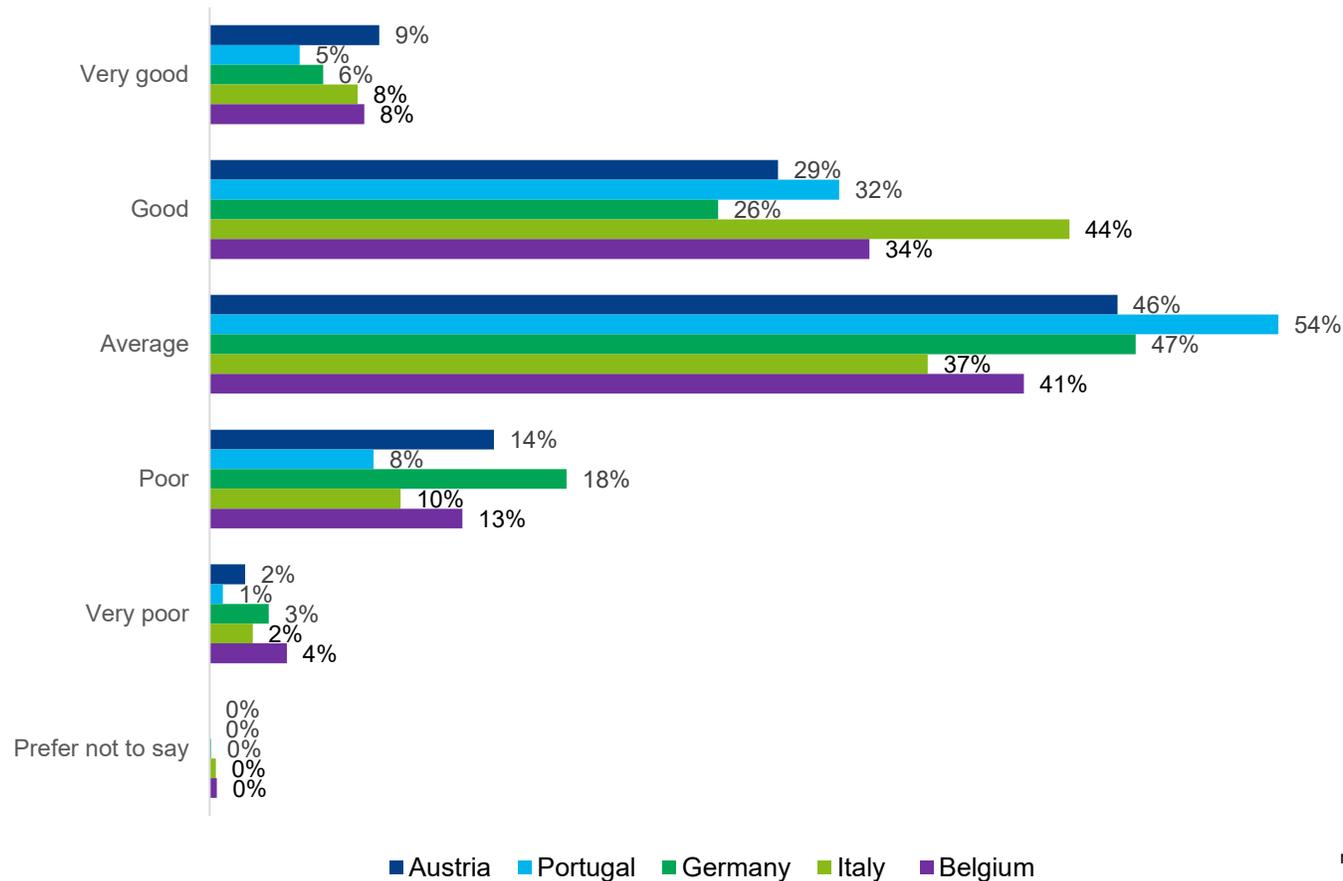
Q6. How would you describe your overall health?



- Across all age groups, “average” is the **most common self-assessment** (ranging from **37%** in <25 to **47%** in 45–54).
- **Younger adults (<25) report “very good” health more often (11%)** than those 65+ (**5%**).
- The proportion describing their health as “poor” or “very poor” **increases with age, peaking in the 55–64 group.**

Most patients in every country describe their health as average

Q6. How would you describe your overall health?

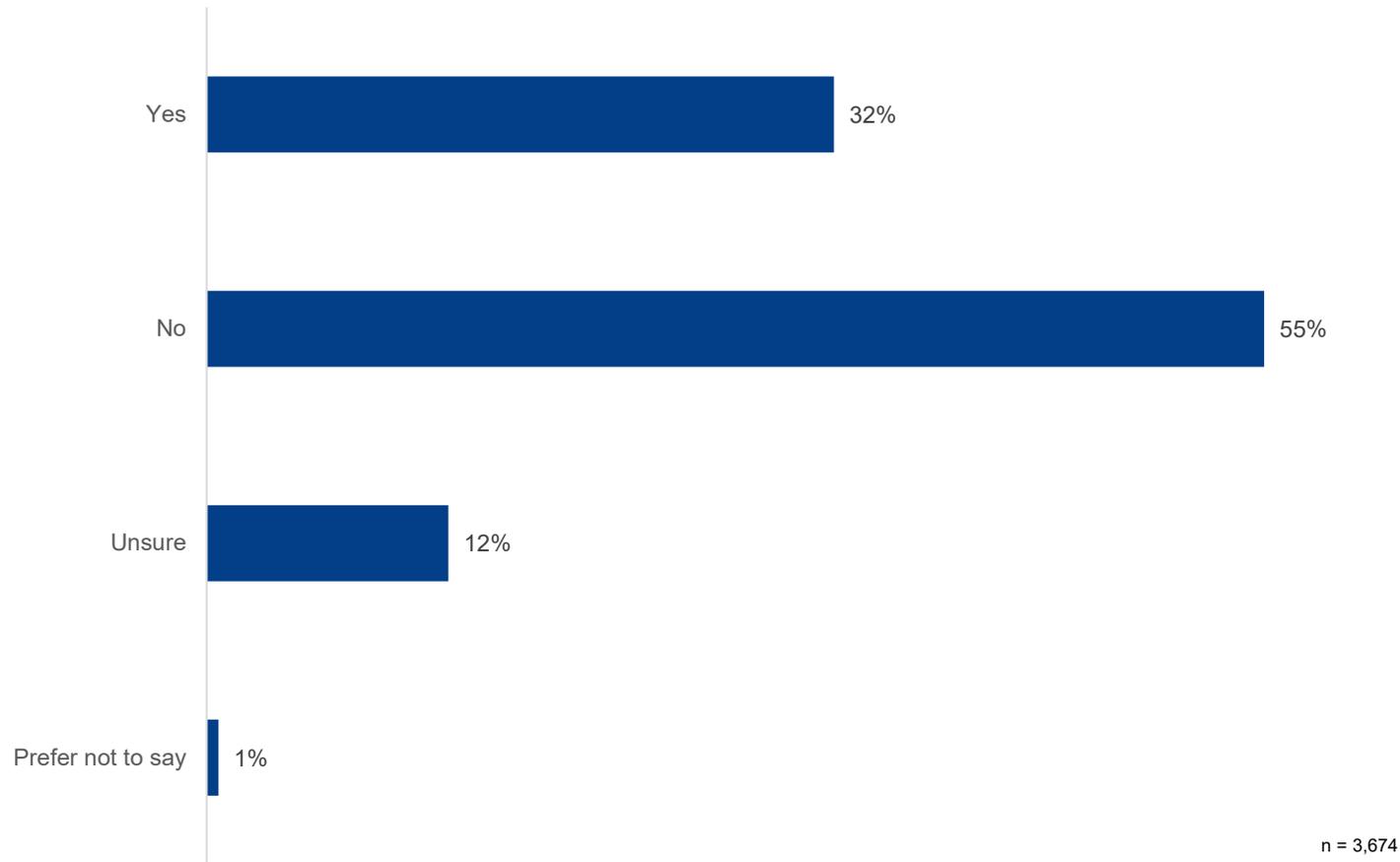


n = 3,674

- “Average” is the **leading category in every country**, ranging from **41%** (Belgium) to **54%** (Portugal).
- “Good” is the next most common response, **especially high in Italy (44%) and Germany (33%)**.
- Poor or very poor health is least frequent, but **Italy shows the highest “poor” rate (18%) and Belgium the highest “very poor” (4%)**.

Most patients reported no known heart risk, but a third had received a warning or diagnosis

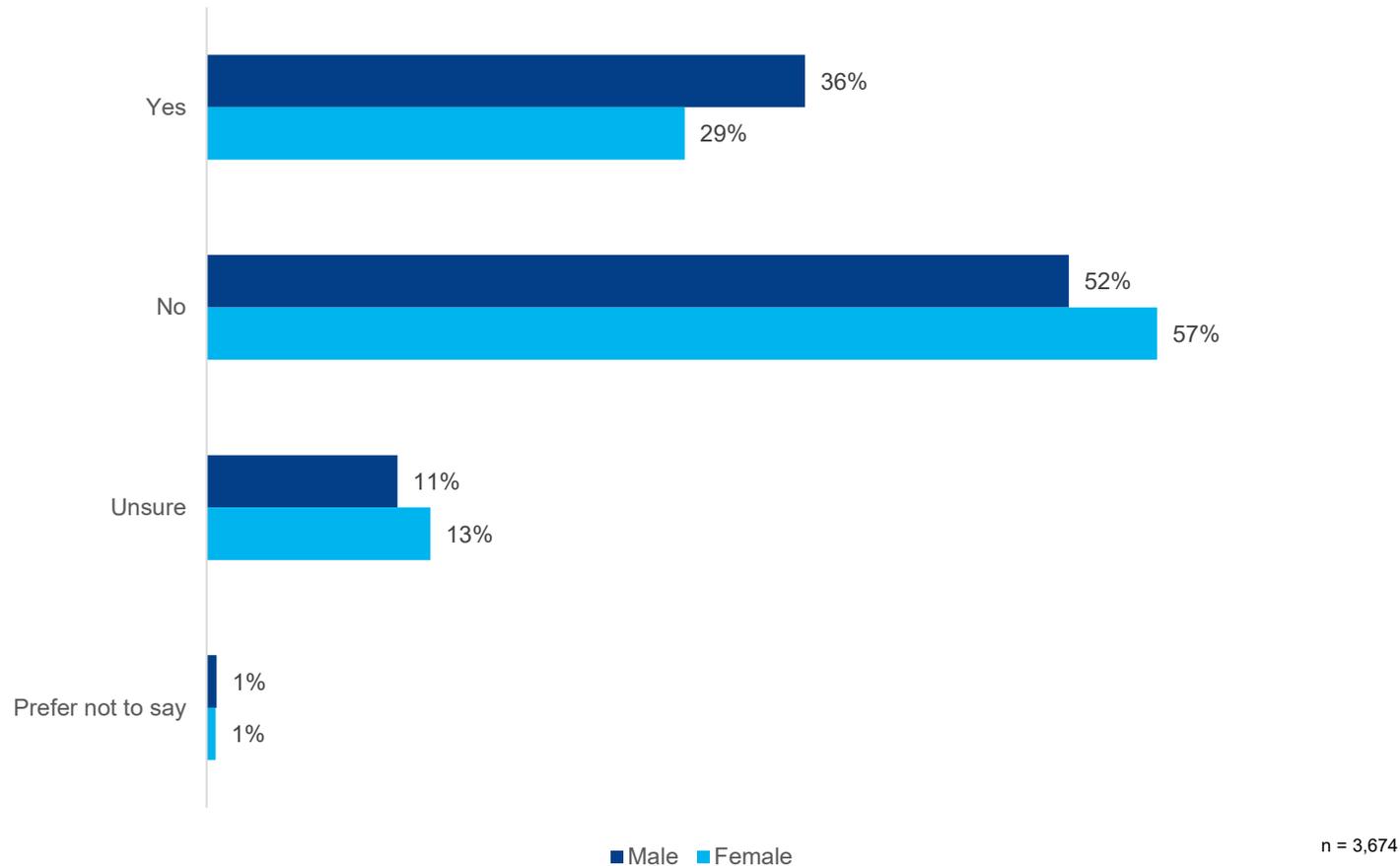
Q7. Have you ever experienced a cardiac event or been told you are at high risk of cardiovascular disease?



- **More than half (55%)** of patients say they've **never had** a heart attack or been told they were at high risk.
- **32%** of patients say **they have experienced a cardiac event** or been told they are at high risk of cardiovascular disease.
- **1 in 10** patients is **unsure** of their status.

Male patients are more likely than females to have experienced a cardiac event or to have been told that they risk having one

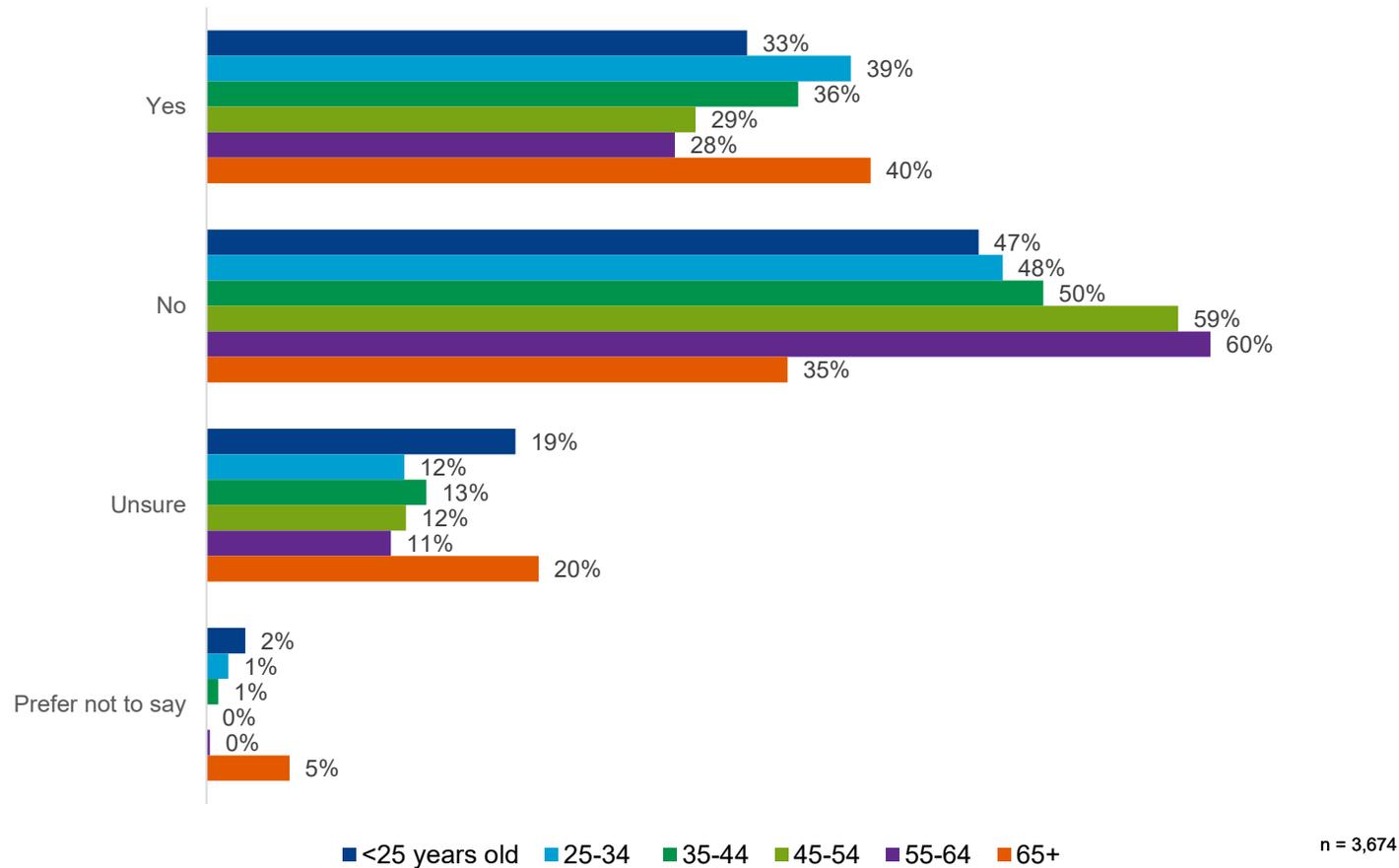
Q7. Have you ever experienced a cardiac event or been told you are at high risk of cardiovascular disease?



- **36%** of **men** versus **29%** of **women** say they've experienced a cardiac event or been told they're high risk.
- **52%** of **men** and **57%** of **women** report no such experience.
- Approximately **11%** of **men** and **13%** of **women** remain unsure.

Younger patients report more often on having experienced a cardiac event or being at risk than middle age generations

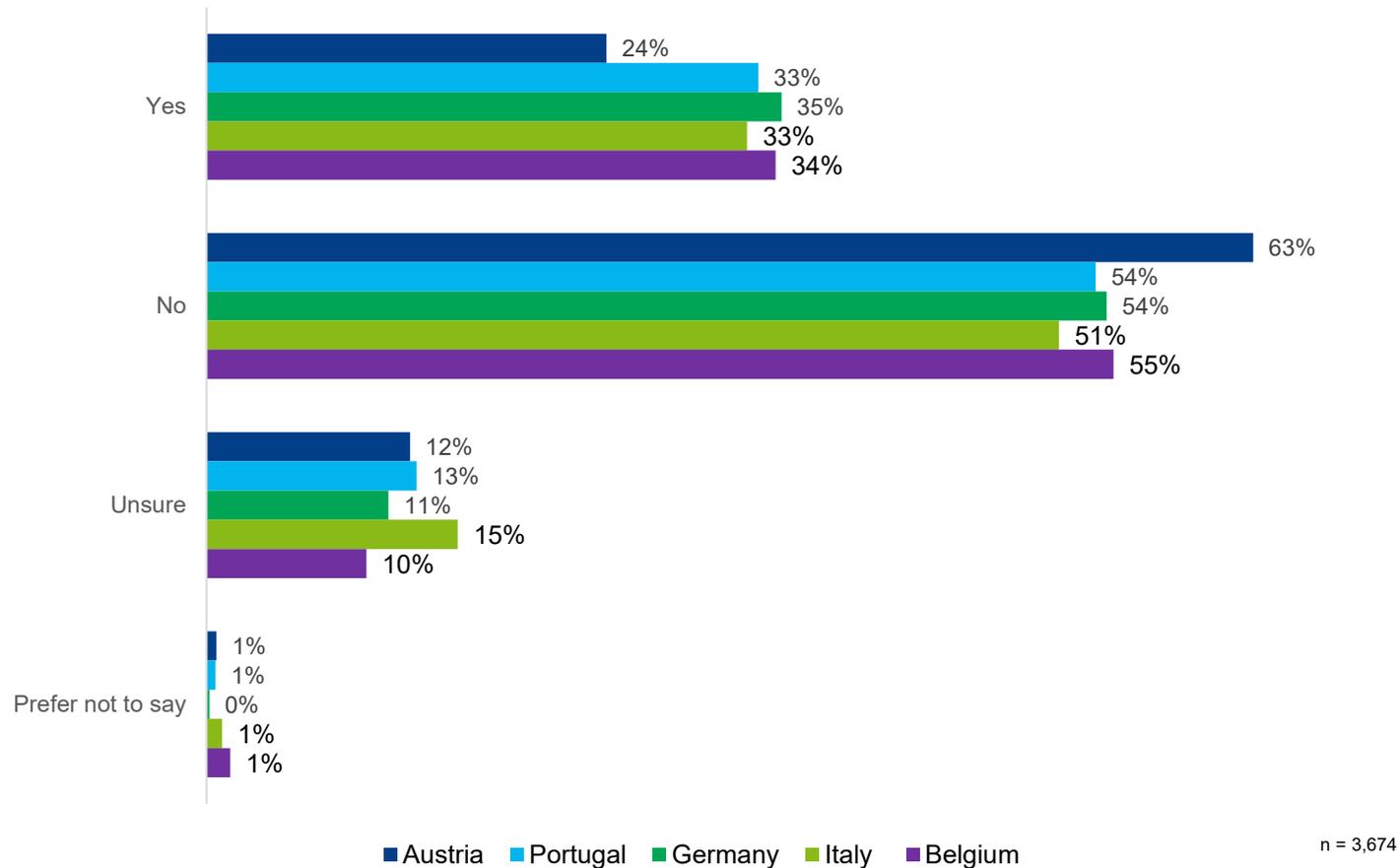
Q7. Have you ever experienced a cardiac event or been told you are at high risk of cardiovascular disease?



- The share answering “Yes” peaks at **40%** among those **65+**.
- In the **55–64 age group**, **36%** report a prior cardiac event.
- Only about **28–33%** of patients **under 45** say they’ve experienced a cardiac event.

Most countries show roughly one-third have had a cardiac event or been told they're at high risk

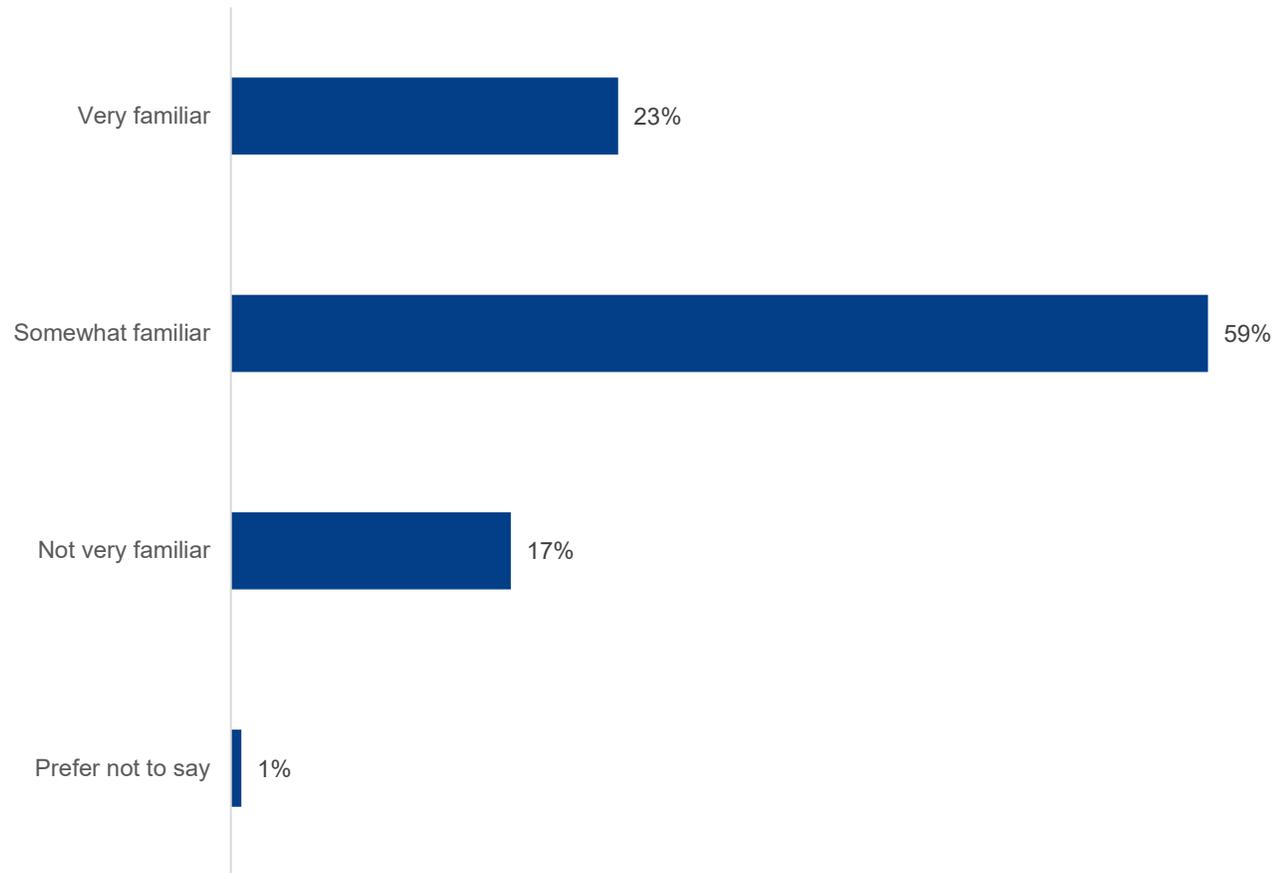
Q7. Have you ever experienced a cardiac event or been told you are at high risk of cardiovascular disease?



- Germany (35%) and Belgium (34%) report the highest “yes” rates, while Austria is lowest at 24%.
- Portugal (33%) and Italy (33%) fall in between, indicating a consistent ~1/3 across markets.
- Those saying “no” dominate in Austria (63%) but are around 54–55% elsewhere.

Further awareness measures are needed with 17% of patients feeling 'not very familiar' with symptoms of cardiovascular diseases

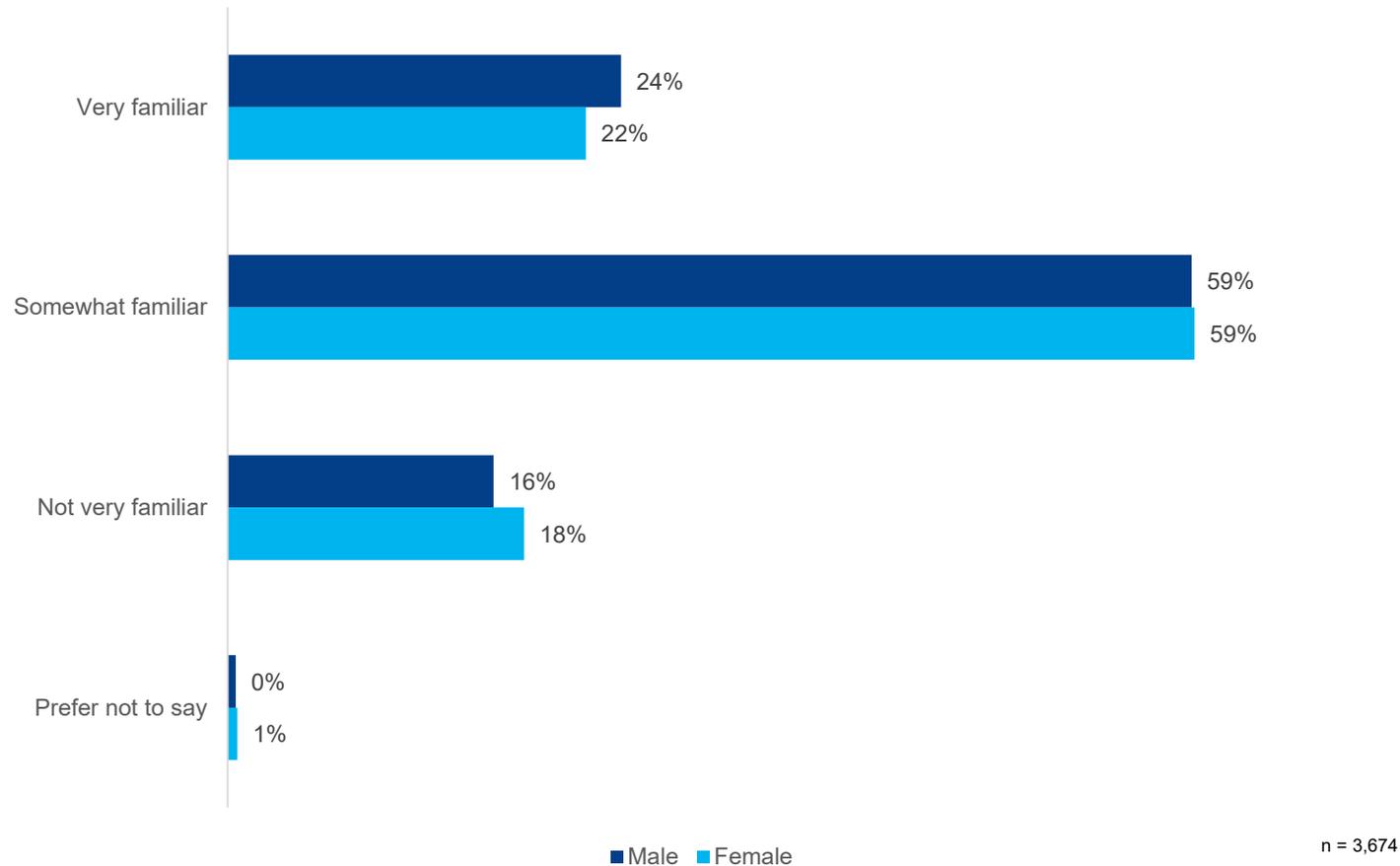
Q8. How familiar are you with the symptoms of cardiovascular disease?



- At **82%**, the **majority of patients** say they are at least somewhat familiar with the symptoms of cardiovascular disease.
- Every **fifth patient** say they are 'very familiar'.
- **17%** of patients say they are '**not very familiar**' with symptoms of cardiovascular diseases, indicating more awareness and education is needed.

The familiarity of symptoms of cardiovascular disease is roughly the same for both genders

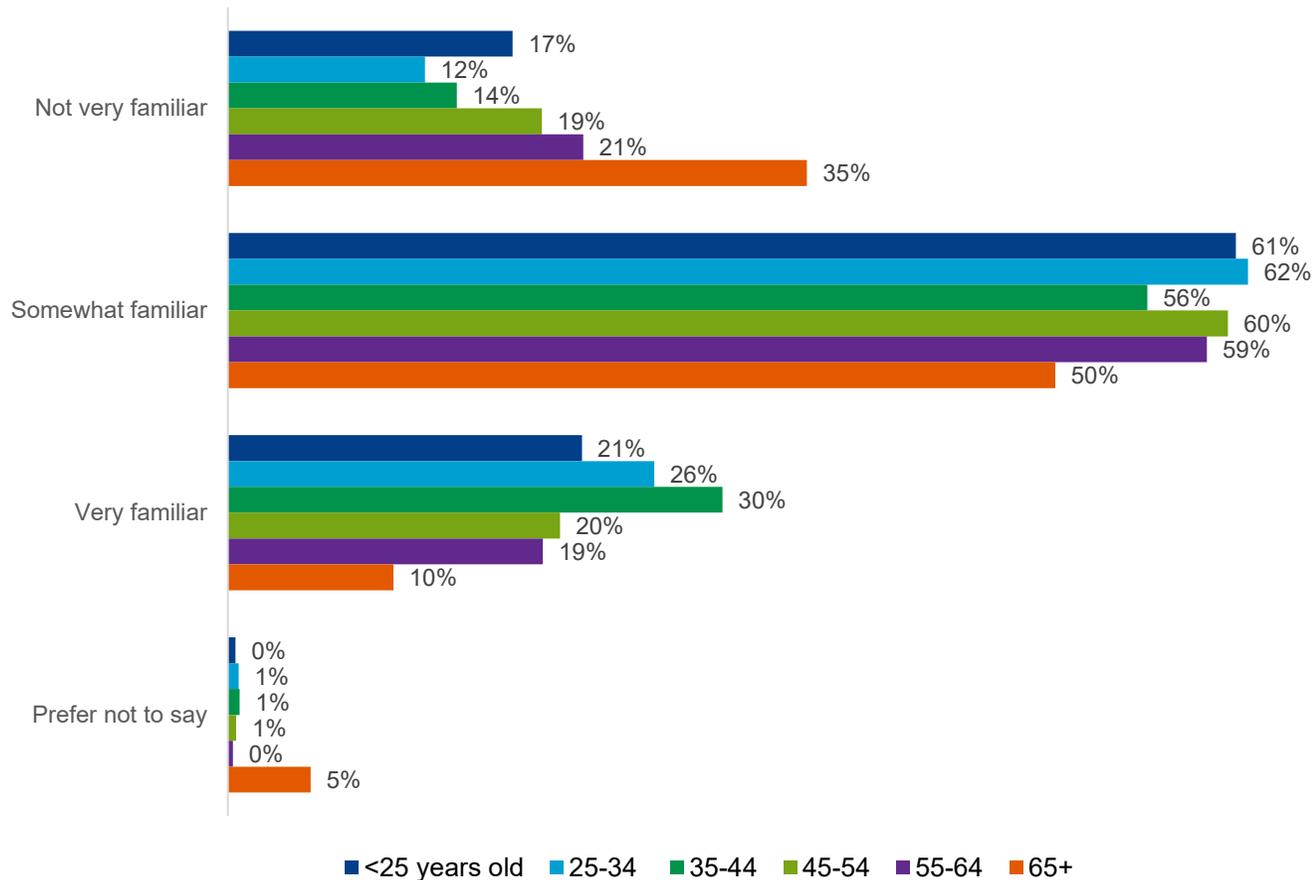
Q8. How familiar are you with the symptoms of cardiovascular disease?



- There are **minor differences** in the familiarity of CVD symptoms between the sexes.
- **Men are slightly more likely to report being very familiar** with the symptoms, while women are slightly more likely to report not being very familiar with the symptoms.

Older patients report less familiarity with cardiovascular symptoms

Q8. How familiar are you with the symptoms of cardiovascular disease?

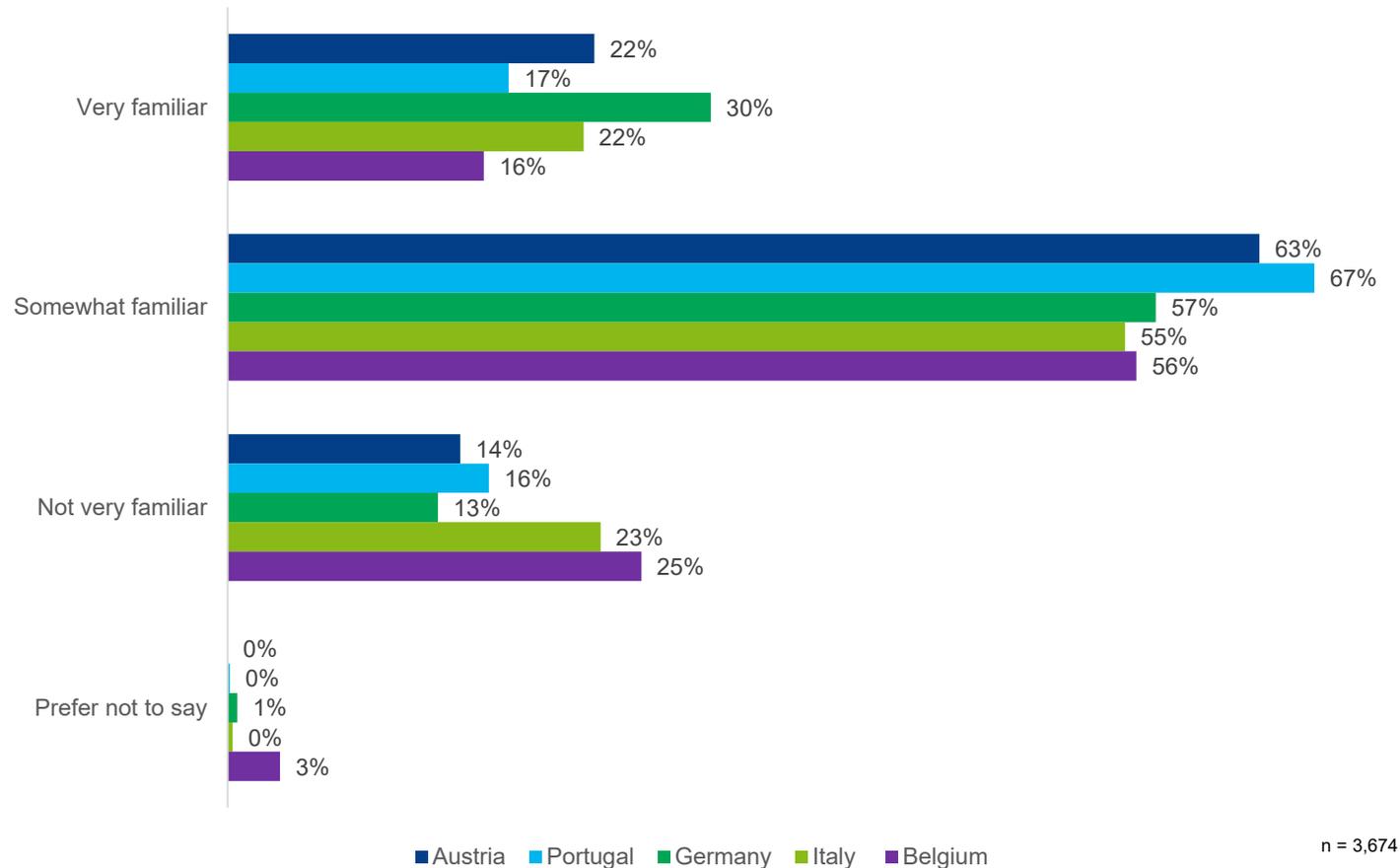


n = 3,674

- **35%** of those **65+** say they're **not very familiar with symptoms**, versus just **12–21%** in younger groups.
- About **60%–62%** across most ages feel **somewhat familiar**, with **50%** in 65+.
- “Very familiar” **peaks at 30%** among 35–44-year-olds but drops to **10%** in those 65+.

Germans say they are very familiar, whereas Italians and Belgians do not rate themselves as particularly familiar

Q8. How familiar are you with the symptoms of cardiovascular disease?

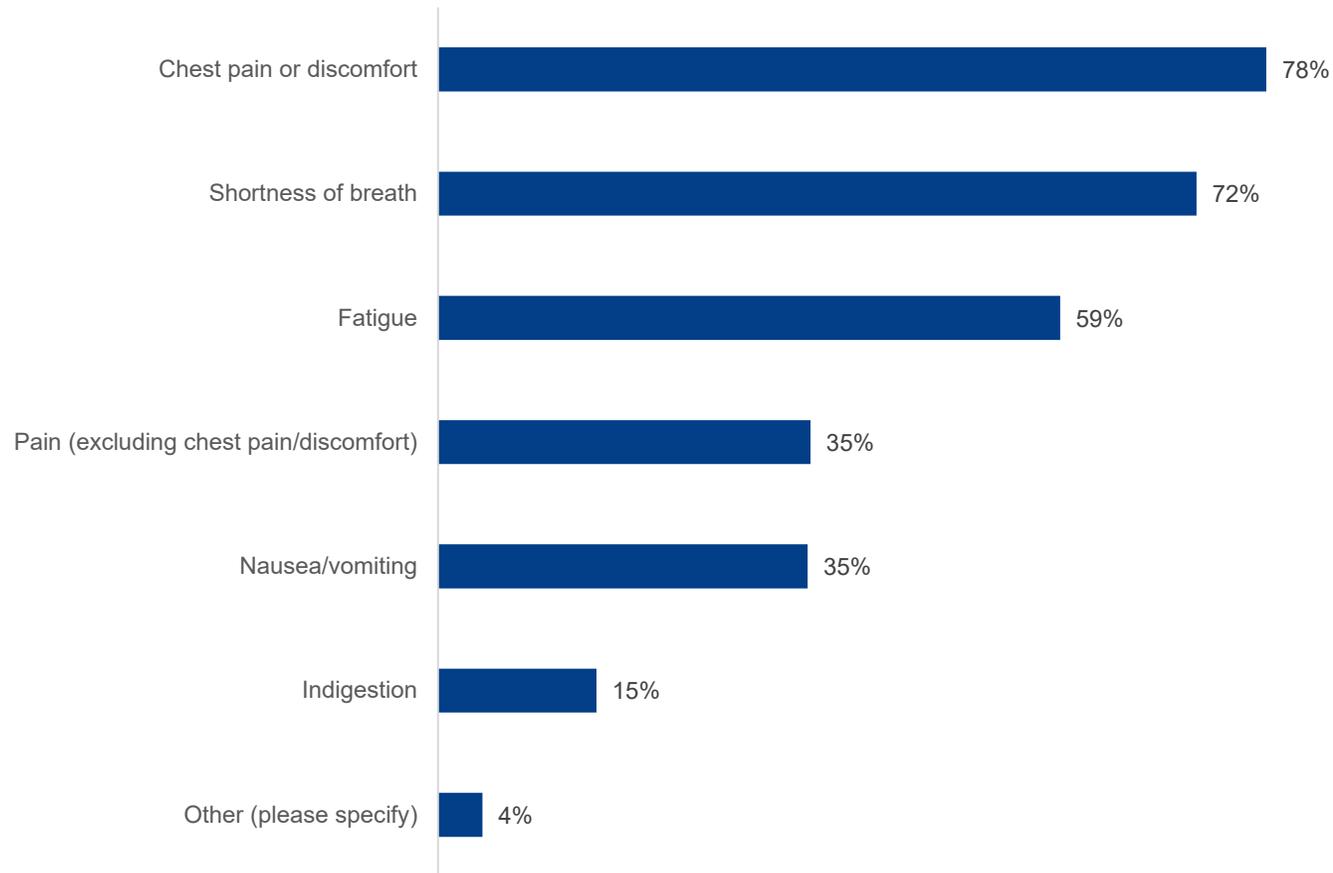


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- A comparison of the countries shows that **the majority of the countries classify themselves in the somewhat familiar category.**
- The respondents from **Austria, Portugal and Germany are most likely to classify themselves as familiar** with the symptoms of CVD.
- **In Italy and Belgium**, on the other hand, more than **20%** of patients do not feel particularly familiar with the symptoms of CVD.

Chest pain and shortness of breath top the list of recognised heart disease symptoms

Q9. Which of the following symptoms do you associate with cardiovascular disease?
Please select all that apply.

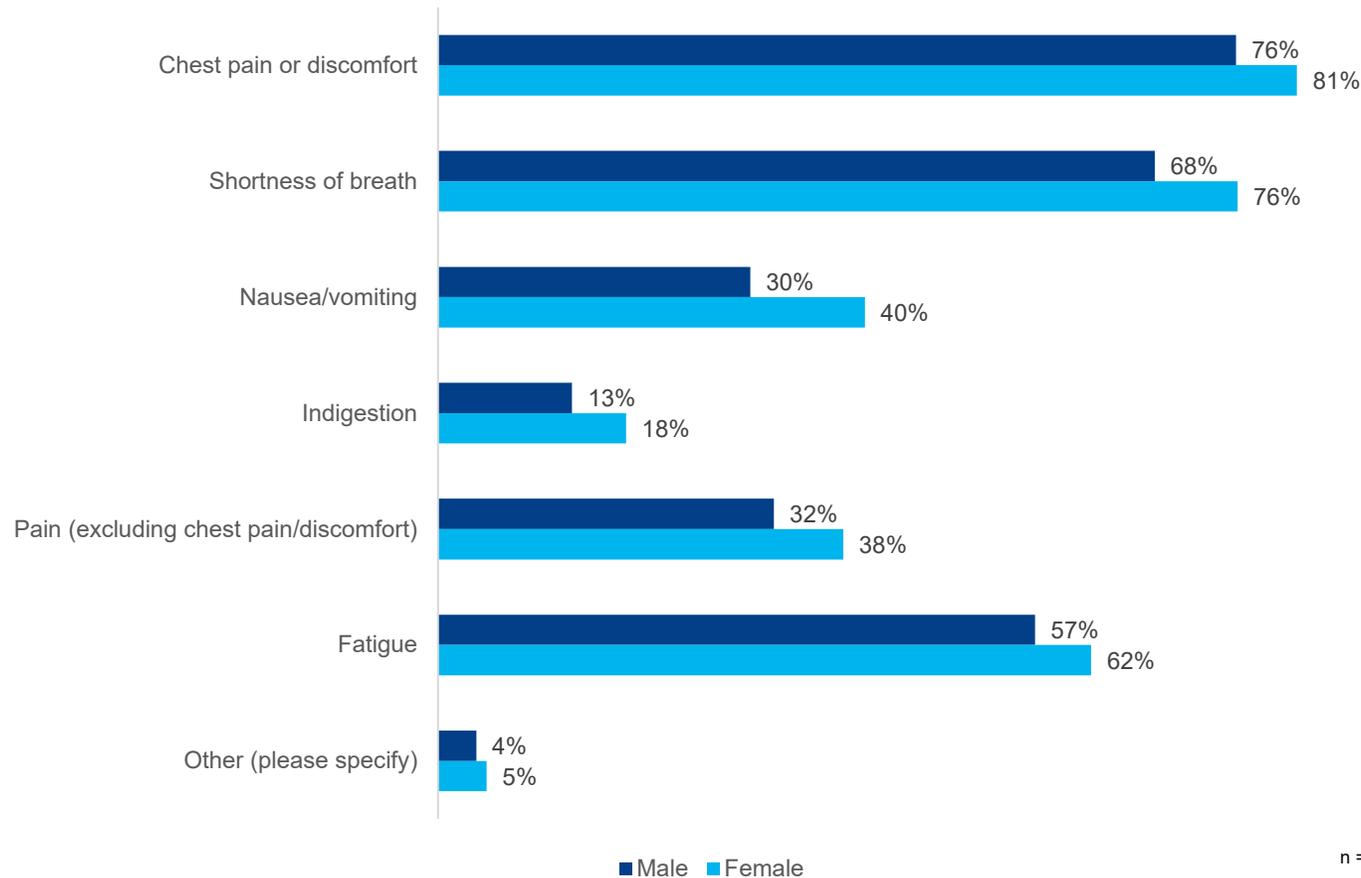


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- Chest pain or discomfort (**78%**) and shortness of breath (**72%**) **are the top two symptoms** associated with cardiovascular disease.
- Fatigue (**59%**) is next, followed by pain that is not in the chest area (**35%**) and nausea/vomiting (**35%**).
- **Indigestion is at the bottom** with only **15%** of patients associating it with cardiovascular disease.

Overall female patients are more aware of cardiovascular disease symptoms than male patients

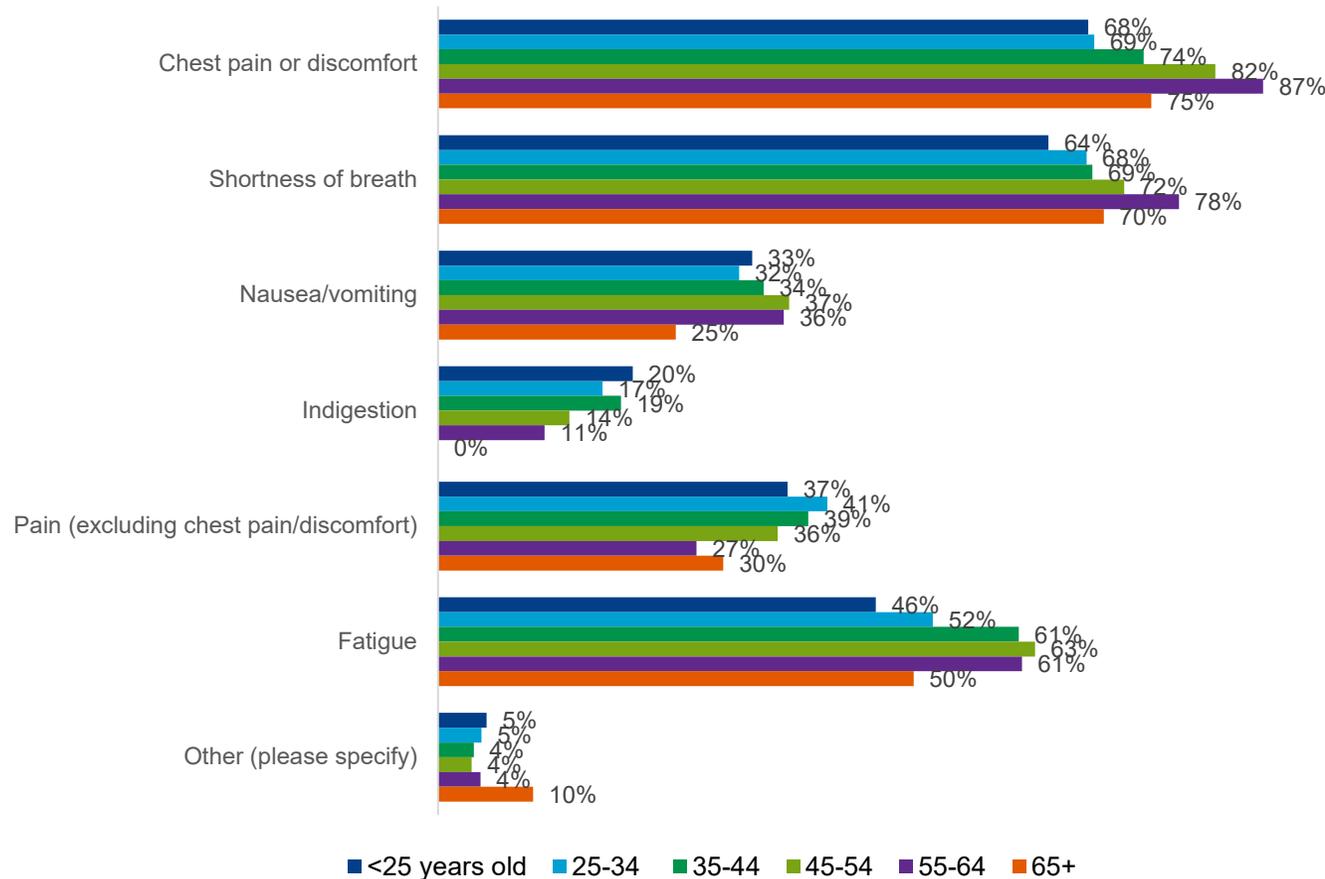
Q9. Which of the following symptoms do you associate with cardiovascular disease?
Please select all that apply.



- **Female patients show a higher association with cardiovascular disease than male patients for all of the symptoms that were surveyed.**

Chest pain and shortness of breath are the most associated symptoms for cardiovascular diseases across all generations

Q9. Which of the following symptoms do you associate with cardiovascular disease?
Please select all that apply.

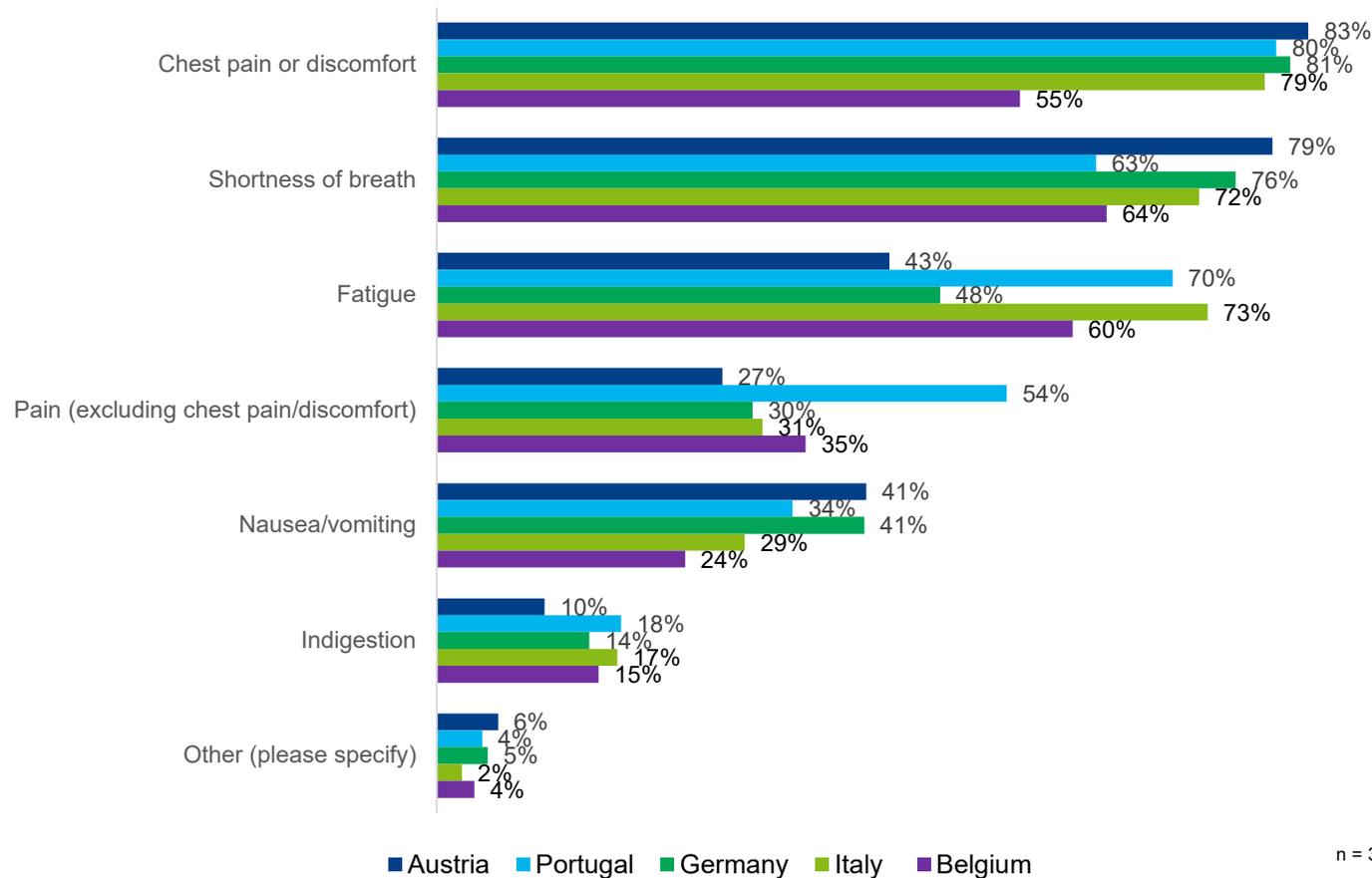


n = 3,674

- Recognition of chest pain/discomfort **rises** from **68%** (<25) to **87%** (65+) as age increases.
- Shortness of breath is seen as a symptom by roughly **64%–78%** across ages, **peaking in 55–64**.
- Fatigue awareness climbs from **46%** (<25) to about **63%** (45–54 and 55–64) before dipping to **50%** (65+).

Most markets overwhelmingly link chest pain and shortness of breath to cardiovascular disease

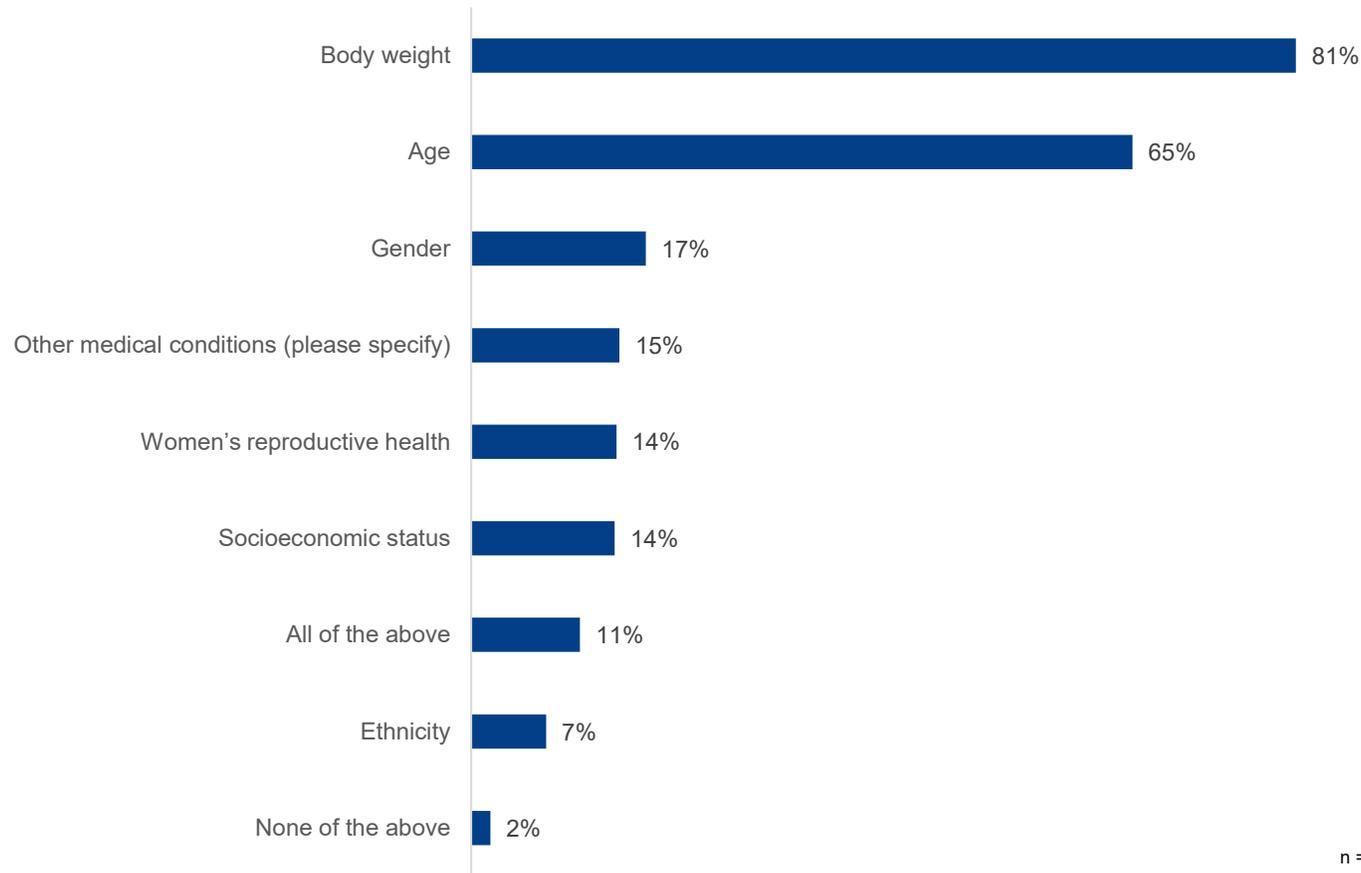
Q9. Which of the following symptoms do you associate with cardiovascular disease?
Please select all that apply.



- Chest pain/discomfort is recognised by **79%** (Italy) up to **83%** (Austria).
- Shortness of breath follows closely: **64%** in Belgium to **79%** in Austria.
- Fatigue awareness rises with age—from **43%** (< 25) to **73%** (55–64). **In Italy it is the second most associated symptom for cardiovascular diseases.**

Weight and age are patients' main perceived risk factors for cardiovascular disease

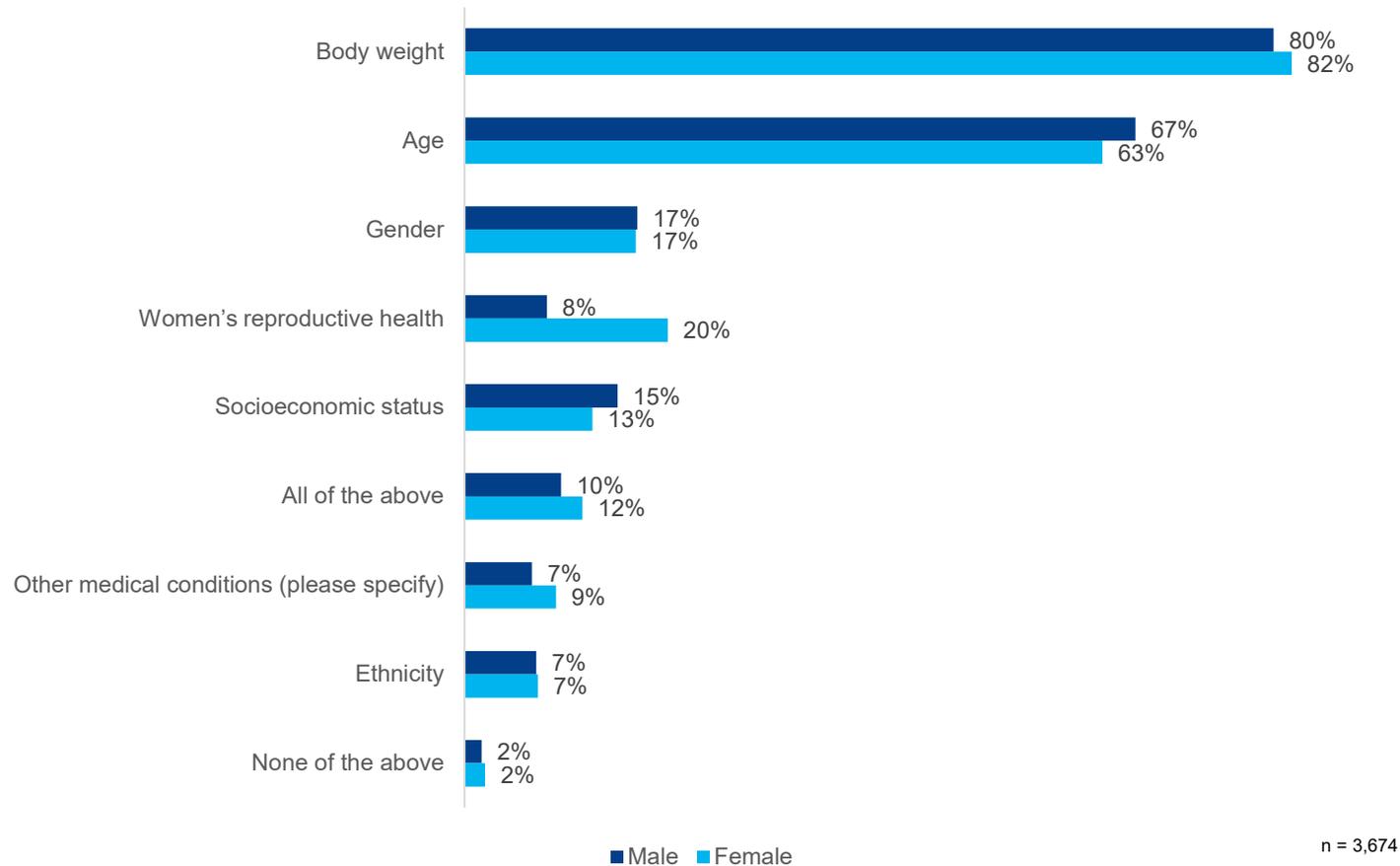
Q10. Which factors do you think contribute most to someone's risk of developing a cardiovascular disease? Please select all that apply.



- Body weight (**81%**) is the **top perceived risk factor**, closely followed by age (**65%**).
- This is followed **at a considerable distance by gender (17%)** other medical conditions (**15%**), socio-economic status (**14%**), and women's reproductive health (**14%**).
- **7%** state that they perceive ethnicity as a risk factor.
- **1 in 10** patients associates **all of the listed to be risk factors**.
- **2%** of patients state that none of the listed contribute significantly to cardiovascular risks, showing further education is needed.

Body weight and age seen as top risk factors, and women are more likely to cite reproductive health

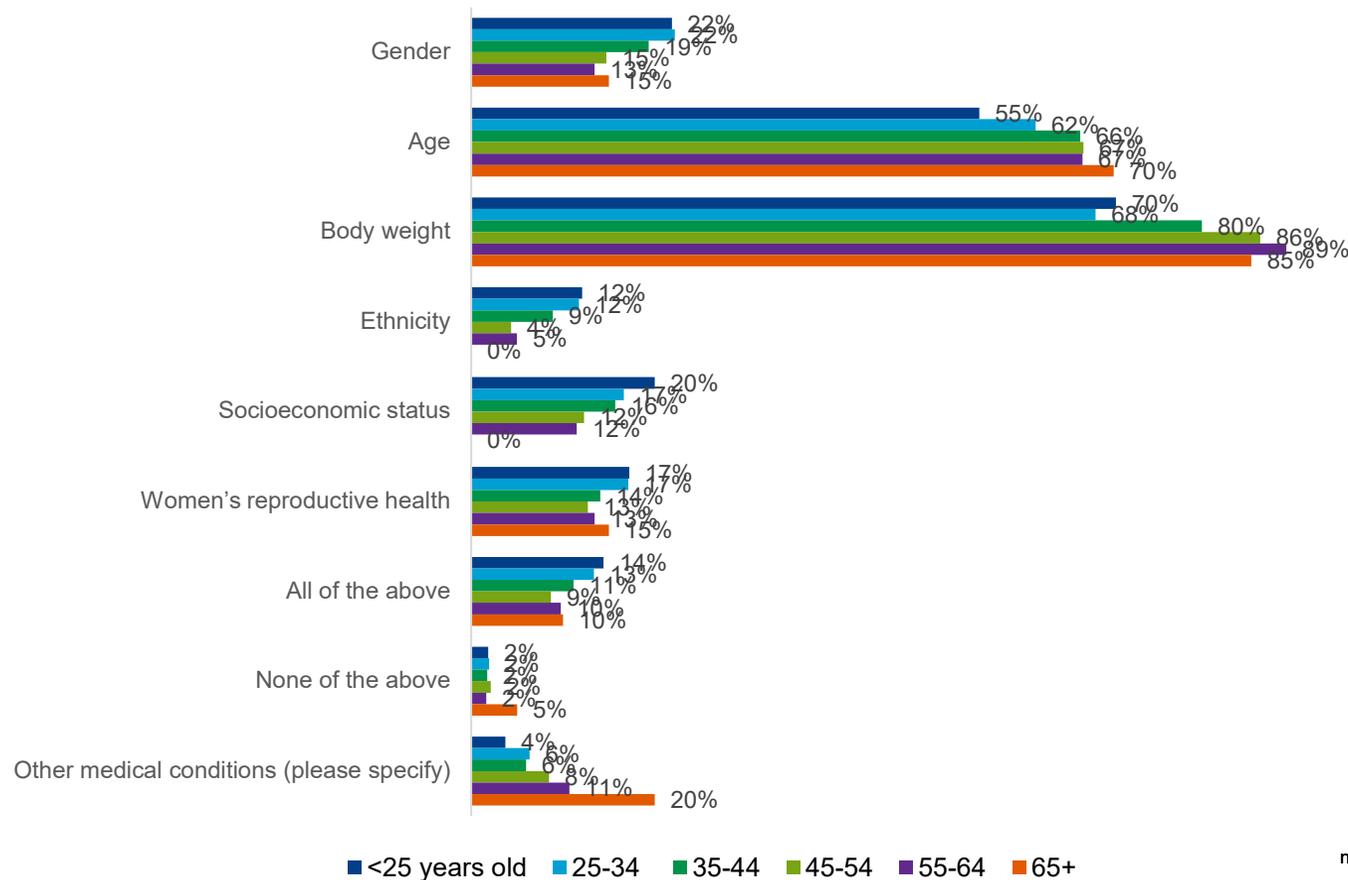
Q10. Which factors do you think contribute most to someone's risk of developing a cardiovascular disease? Please select all that apply.



- **80%** of men and **82%** of women **identify body weight as a key contributor** to cardiovascular risk.
- Age follows closely, with **67%** of men and **63%** of women selecting it.
- Notably, **20%** of **women versus 8%** of men **consider women's reproductive health a major risk factor**.

Body weight and age dominate perceived cardiovascular risk factors across all ages

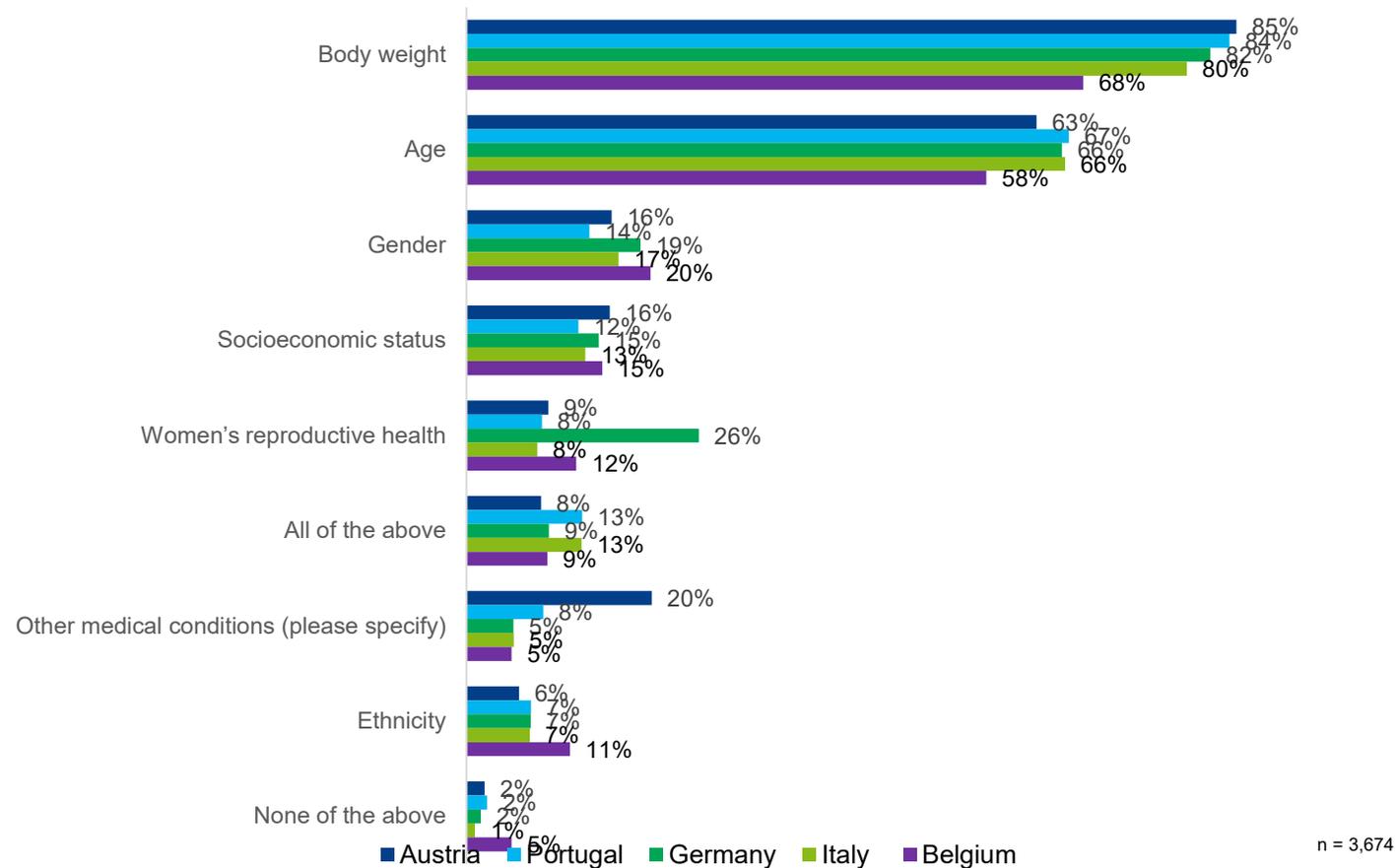
Q10. Which factors do you think contribute most to someone's risk of developing a cardiovascular disease? Please select all that apply.



- **Body weight is the most cited risk factor**, rising from **68%** in <25s to **86%** in 65+.
- **Age follows closely**, selected by **55%** of <25s and up to **70%** of 55–64.
- Other factors like gender (**9–22%**) and women's reproductive health (**13–17%**) are **far less recognised**.

Body weight overwhelmingly seen as top risk factor across all markets

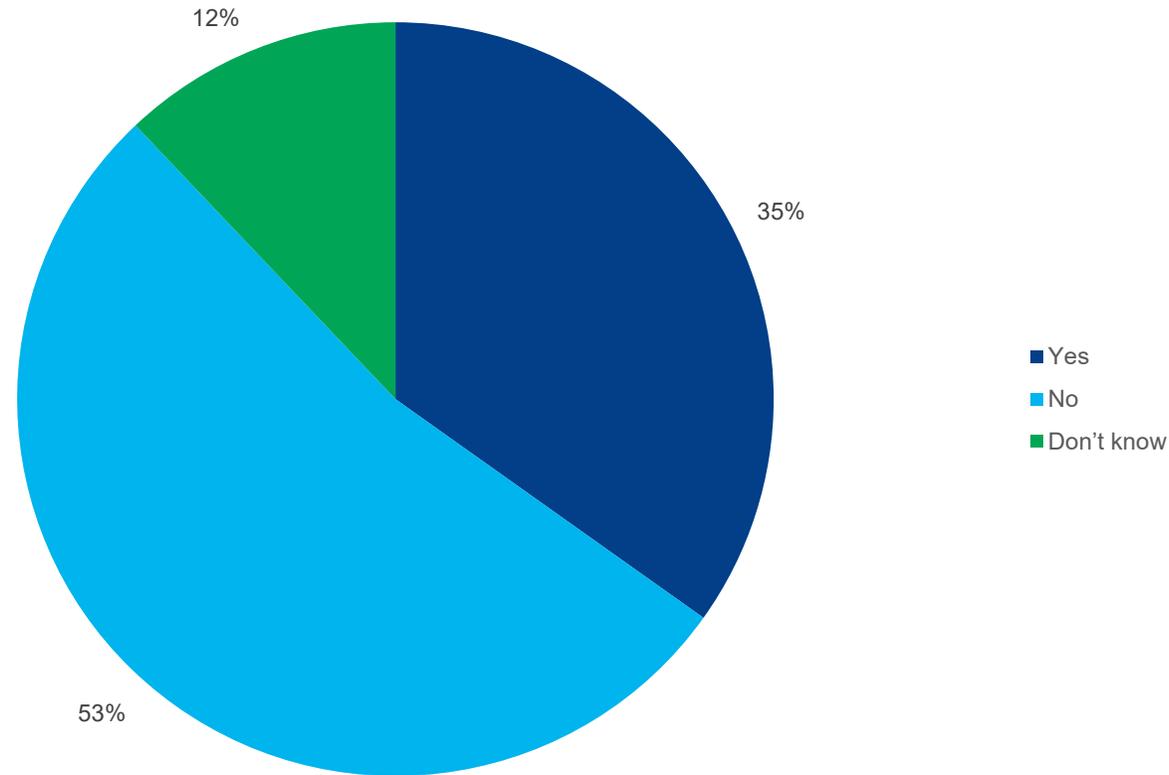
Q10. Which factors do you think contribute most to someone's risk of developing a cardiovascular disease? Please select all that apply.



- **Body weight ranks highest everywhere**, cited by **85%** in Austria, **82%** in Portugal, and around **80%–86%** elsewhere.
- **Age is the second most selected factor** (**58%–68%** across countries).
- **Italian respondents uniquely emphasize women's reproductive health (26%)**, compared to **8%–12%** in other markets.

2 out of 3 patients say they are not aware of gender differences in the symptoms of cardiovascular disease

Q11. Are you aware of any difference in symptoms of cardiovascular disease between men and women?

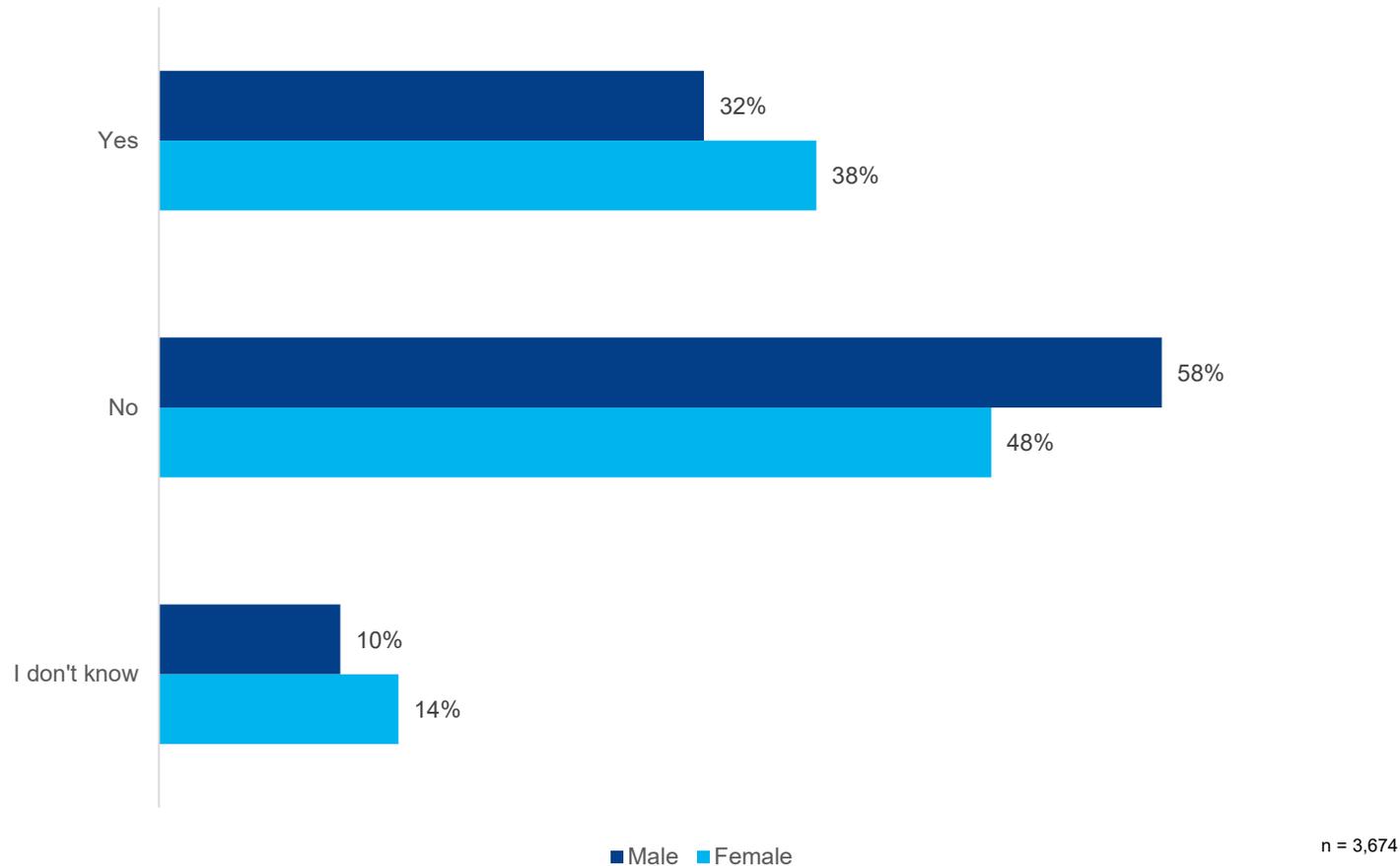


n = 3,674

- **More than half of patients (53%)** are not aware of gender differences in the symptoms of cardiovascular disease.
- About **one in three** say they are aware of these differences between men and women.

Both female and male patients are largely unaware of the differences in cardiovascular symptoms between the sexes, men even less so

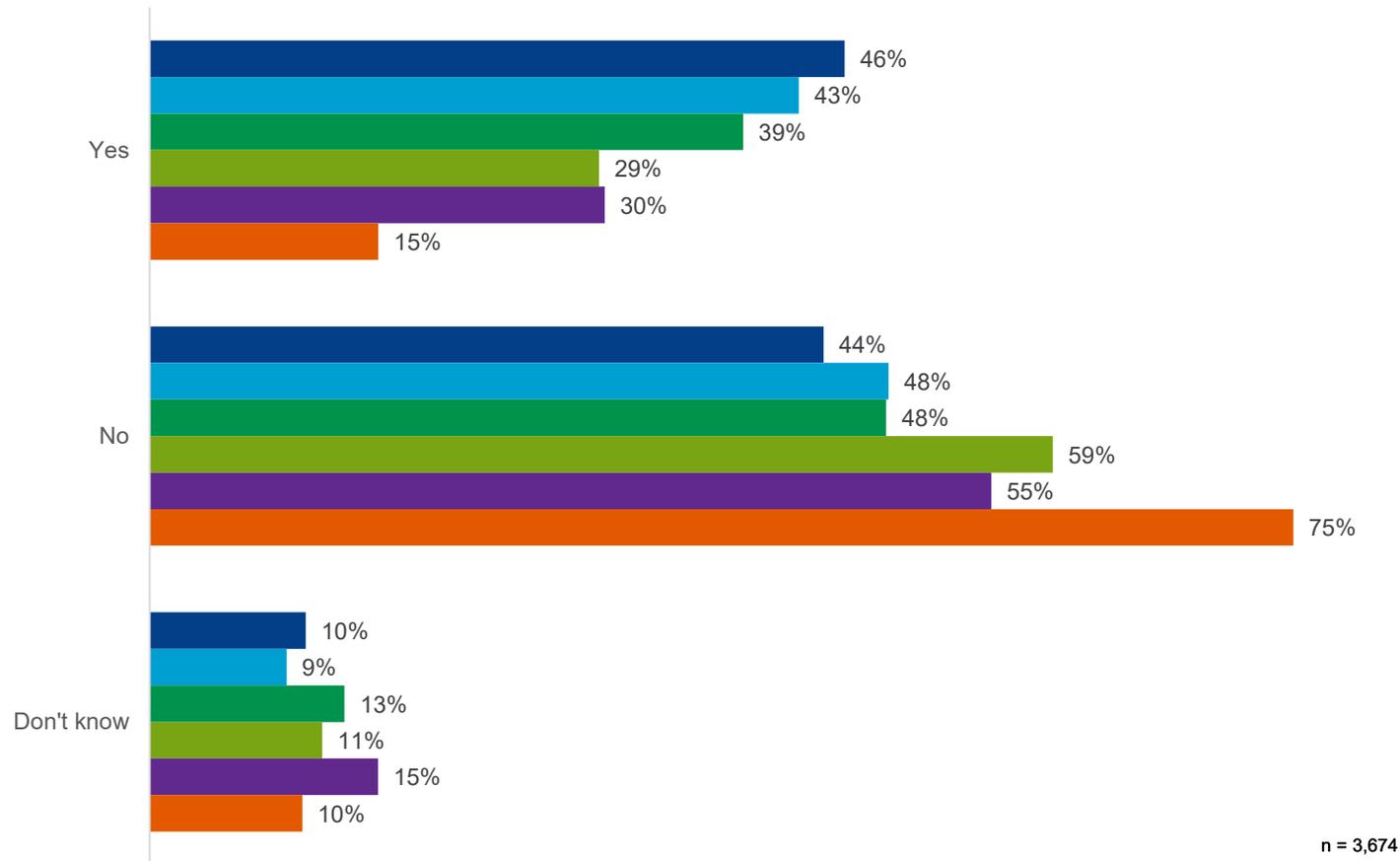
Q11. Are you aware of any difference in symptoms of cardiovascular disease between men and women?



- More female patients (**38%**) than male patients (**32%**) say "yes," indicating **slightly higher awareness of differences in cardiovascular symptoms between the sexes among women.**

Awareness of gender symptom differences drops sharply with age

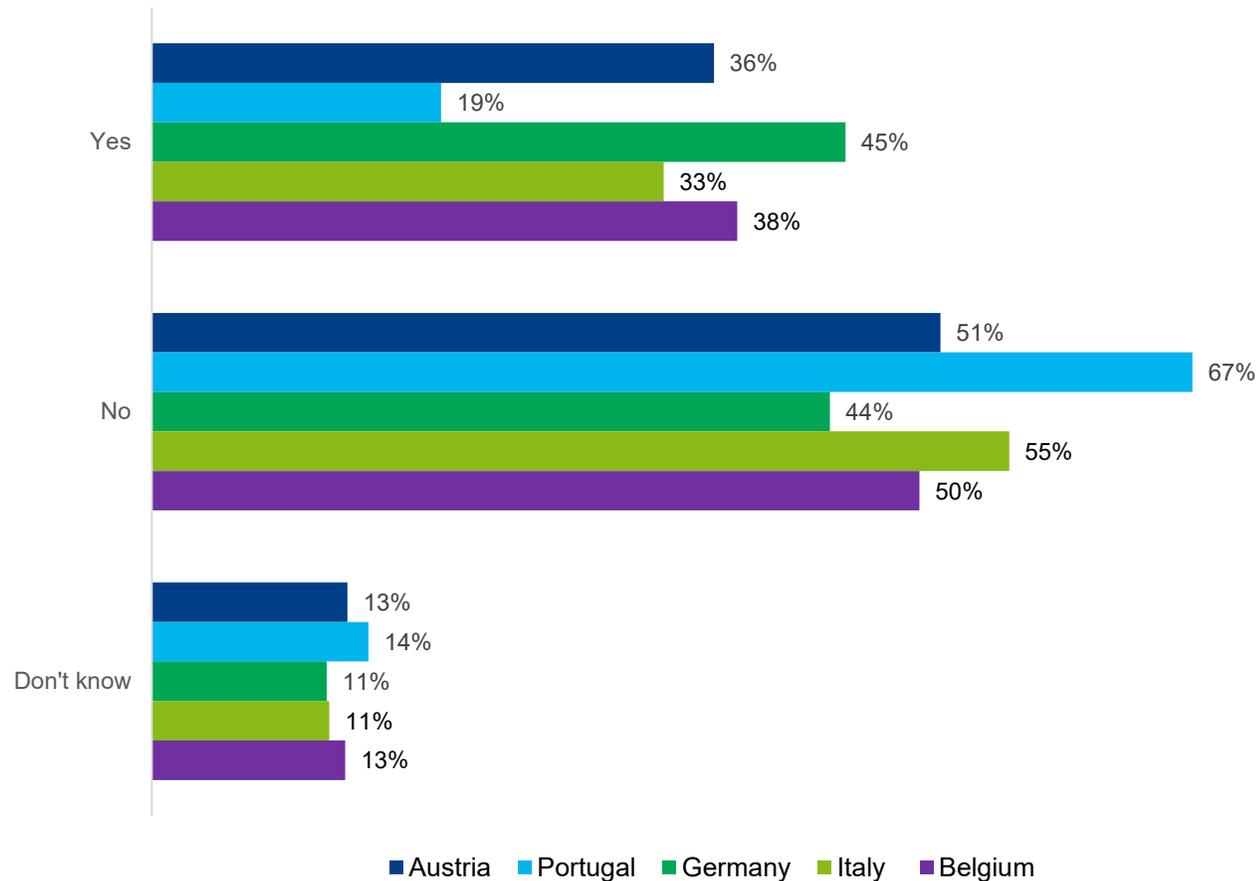
Q11. Are you aware of any difference in symptoms of cardiovascular disease between men and women?



- Nearly half of those under 25 (**46%**) and 25–34-year-olds (**43%**) **recognise that symptoms differ between men and women.**
- Recognition falls to **39%** in 35–44s and plummets to **30%** (45–54) and **29%** (55–64).
- Only **15%** of those **65+** are aware of **gender-based symptom differences.**

Awareness of gender-specific symptoms varies widely across countries

Q11. Are you aware of any difference in symptoms of cardiovascular disease between men and women?

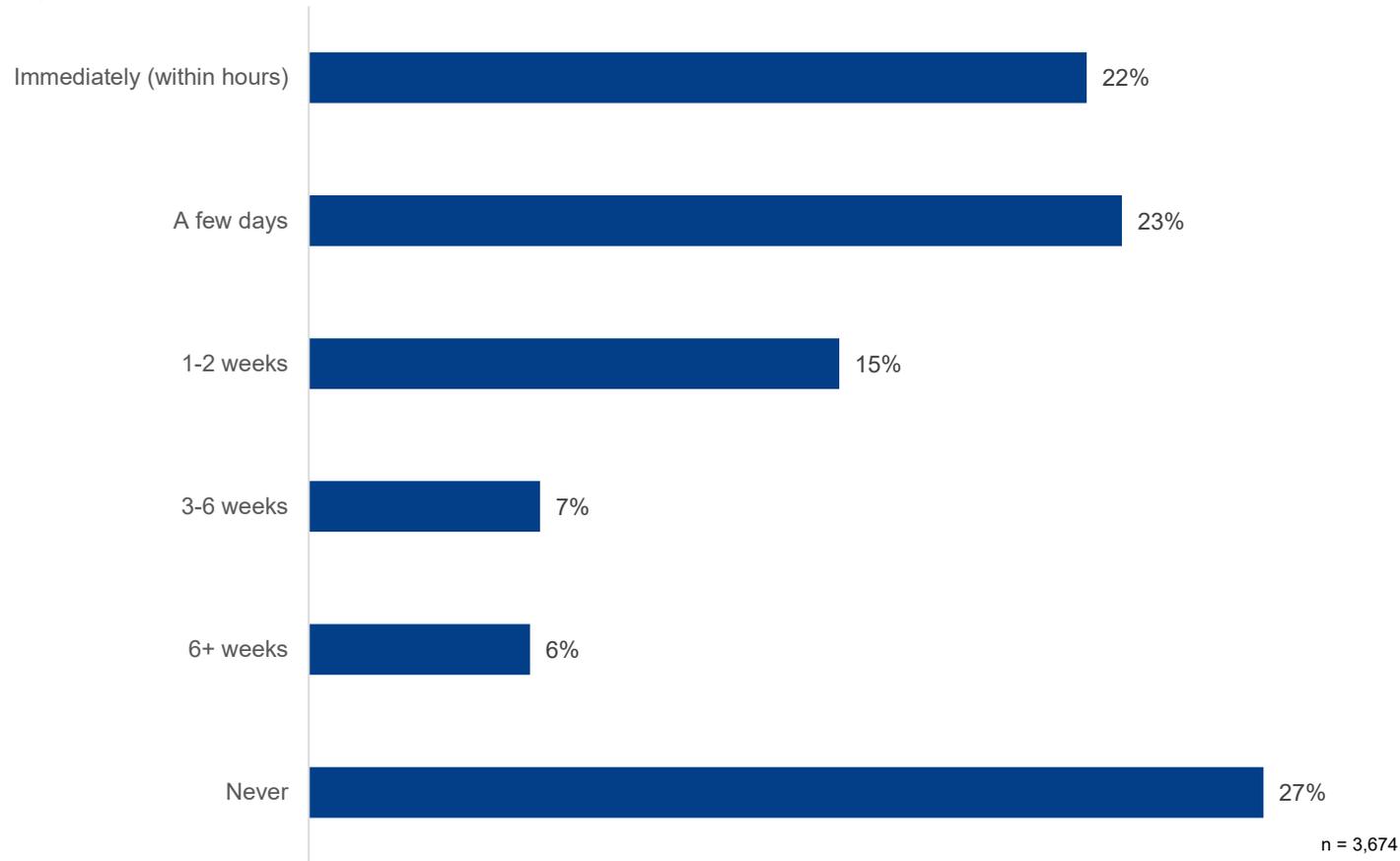


n = 3,674

- **Germany leads** with **45%** recognising symptom differences, while Portugal trails at **19%**.
- Austria (**36%**) and Belgium (**38%**) show **moderate awareness**.

Every fourth patient never sought a medical appointment after the onset of cardiovascular disease related symptoms

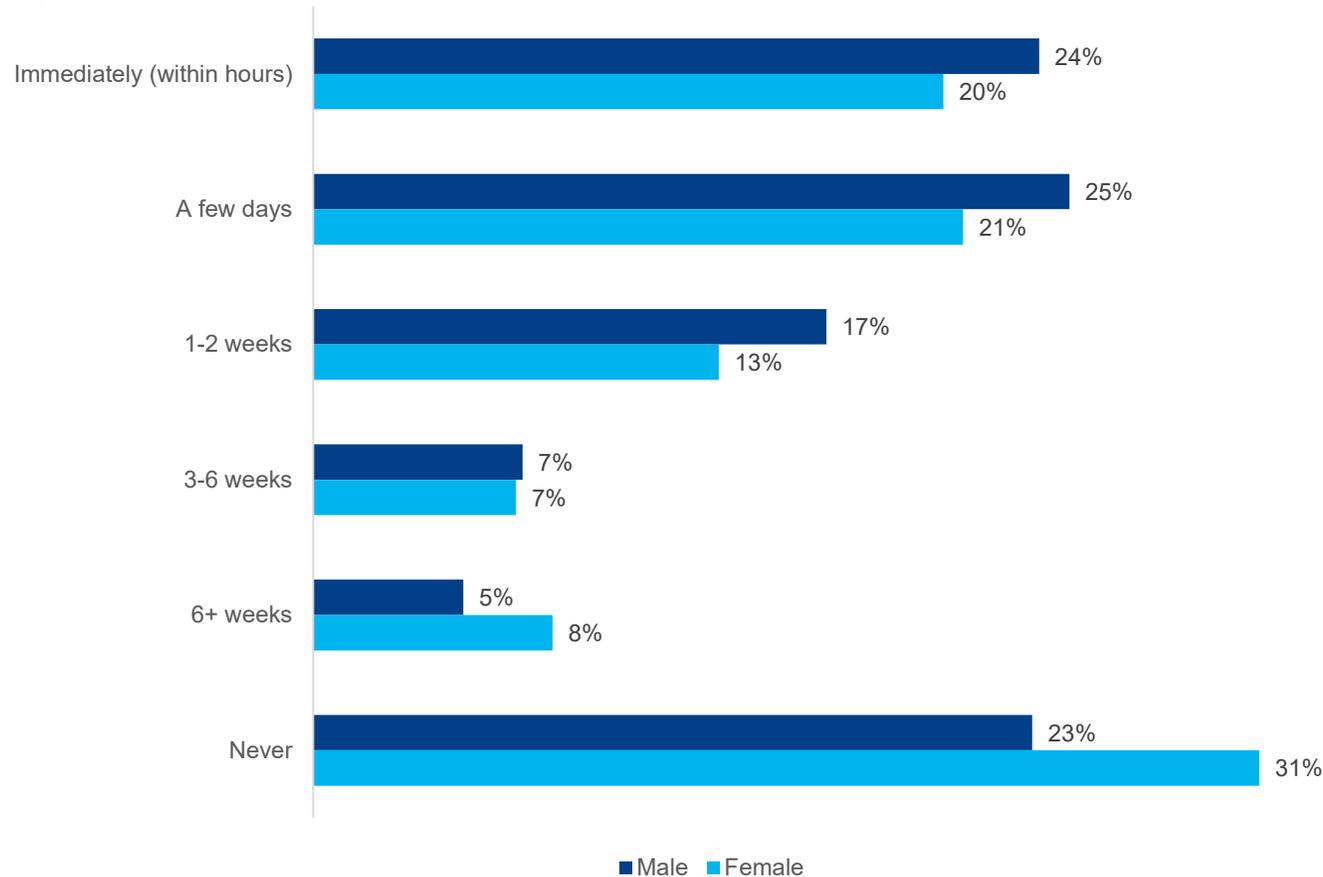
Q12. If you have had a medical appointment for cardiovascular disease-related symptoms, how long did you wait between onset of symptoms to contacting your physician or healthcare provider?



- Immediate responses were reported by **22%** of patients, while **24%** waited a few days before seeking medical attention.
- **16%** waited 1-2 weeks and smaller proportions waited 3-6 weeks (**7%**) or more than 6 weeks (**6%**).
- **More than a quarter of respondents (27%)** said they had never contacted a healthcare professional despite having cardiovascular symptoms.

It is clear that men act faster on heart symptoms and women delay care more often

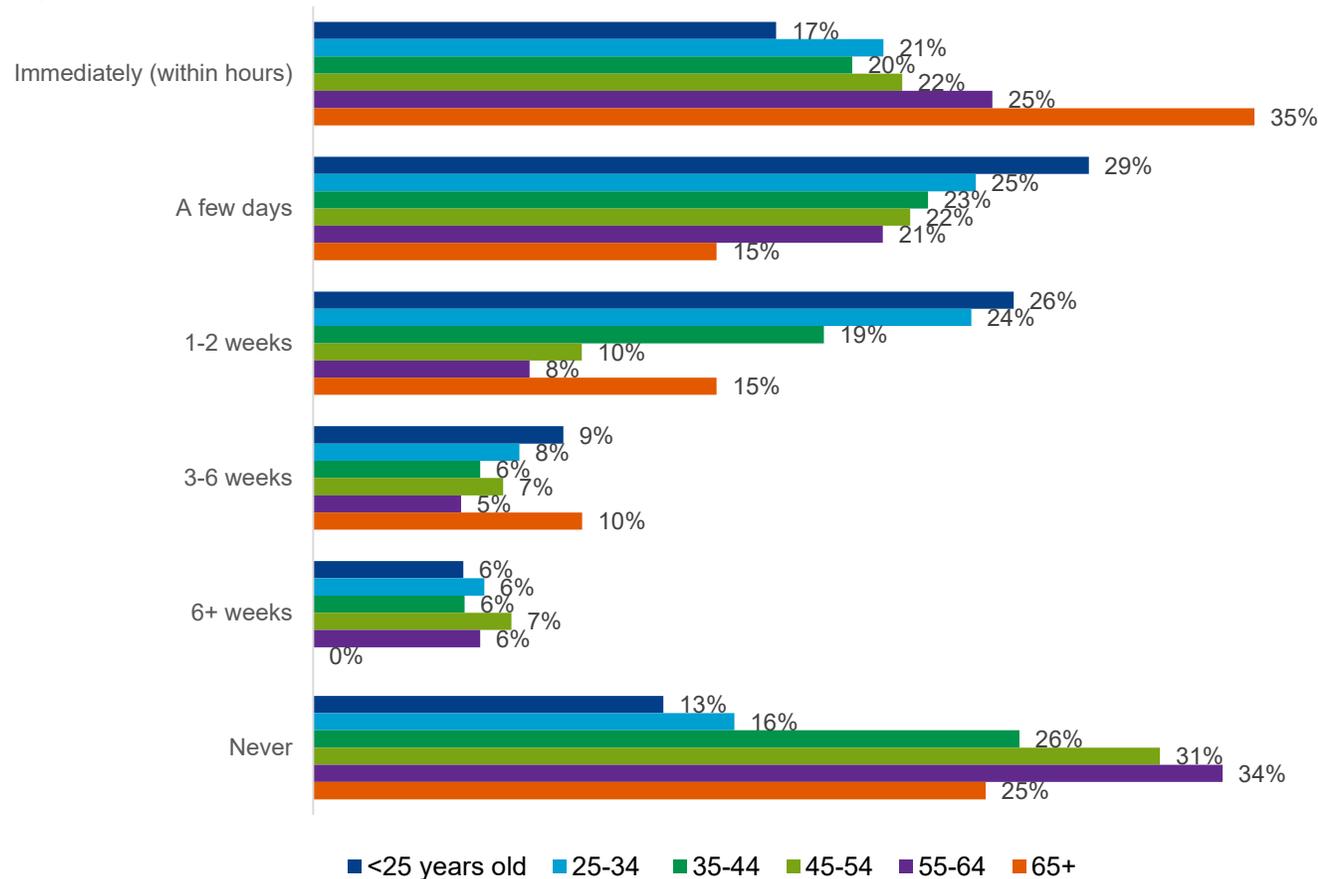
Q12. If you have had a medical appointment for cardiovascular disease-related symptoms, how long did you wait between onset of symptoms to contacting your physician or healthcare provider?



- **Half of male patients** seek immediate medical attention within four hours or a few days of the onset of symptoms, compared to **only four in ten female patients**.
- **17%** of male patients wait one to two weeks after symptom onset, compared to **13%** of female patients.
- Nearly **40%** of **female patients wait more than six weeks after symptom onset**, compared to **28%** of male patients.

Time to reach out to HCPs when experiencing cardiovascular disease related symptoms varies widely by age, with seniors most likely to act immediately

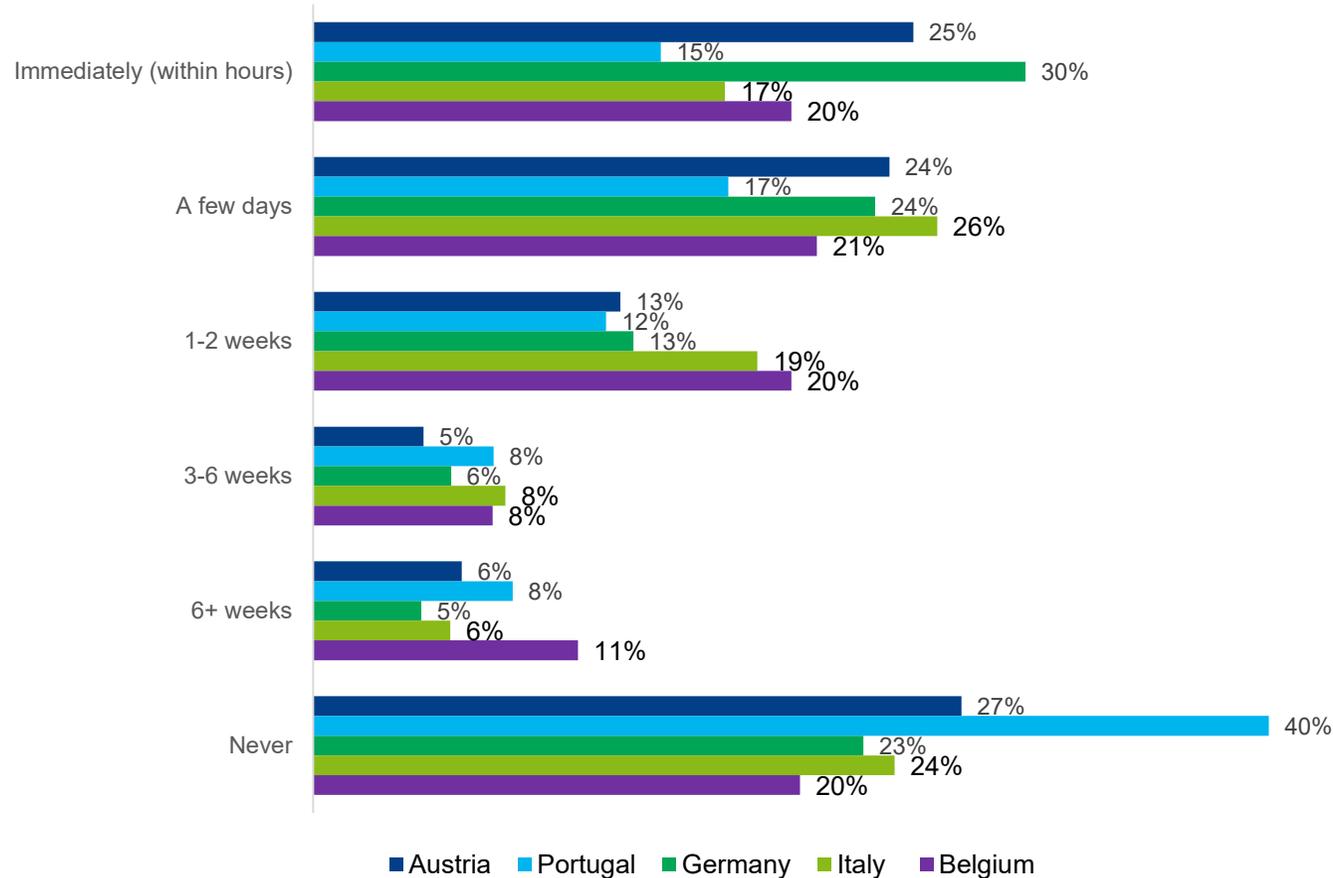
Q12. If you have had a medical appointment for cardiovascular disease-related symptoms, how long did you wait between onset of symptoms to contacting your physician or healthcare provider?



- **35%** of those **65+** contacted a provider **within hours of symptoms**, compared to just **17%** of under-25s.
- Young adults (<25) **most often waited “a few days” (29%)**, whereas 25–34-year-olds peaked at **26%** waiting 1–2 weeks.
- **A notable share never sought care: 34%** of 55–64-year-olds and **31%** of 45–54-year-olds

Never seeking care is most common in Portugal whereas Germany leads in immediate action

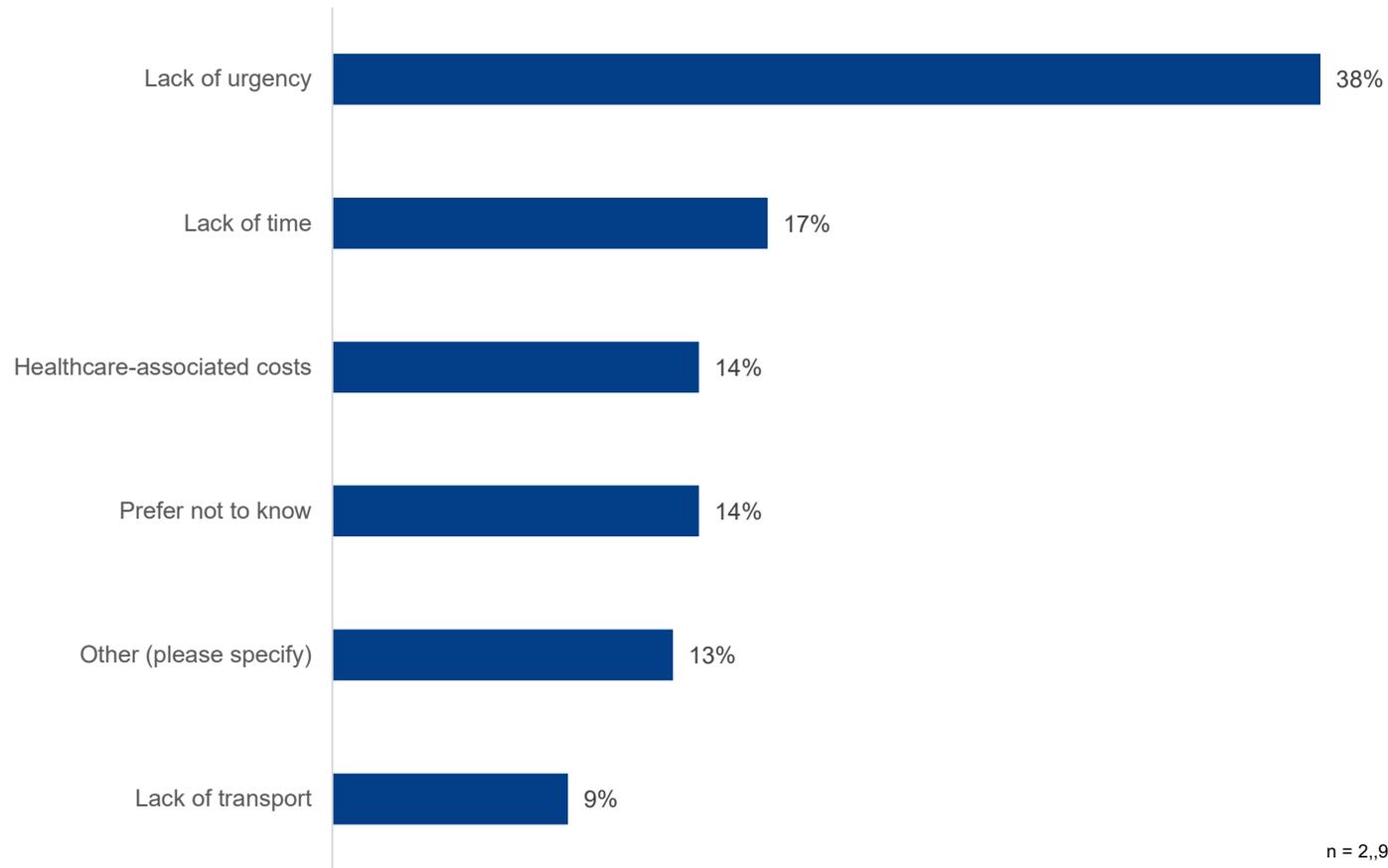
Q12. If you have had a medical appointment for cardiovascular disease-related symptoms, how long did you wait between onset of symptoms to contacting your physician or healthcare provider?



- **40%** of Portuguese respondents never contacted a provider after symptoms, compared with **20%–27%** elsewhere.
- **30%** of Germans sought care immediately (within hours), the highest of all markets.
- “A few days” is the next most common response across countries (**21%–26%**).

Perceived low urgency and practical barriers lead to individuals delaying to seek medical care

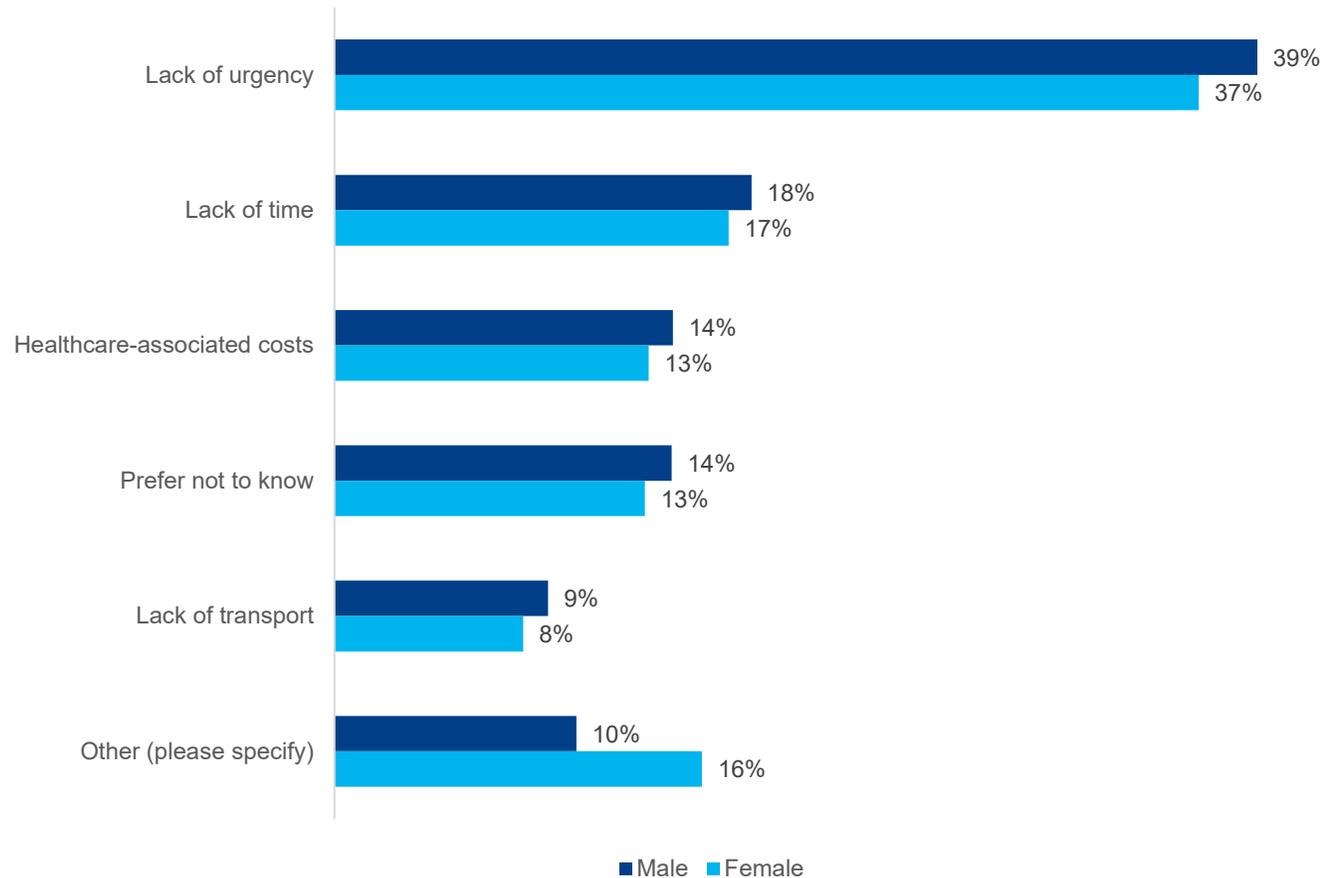
Q13. If you didn't seek help immediately, what was the reason for delaying seeking medical assistance?



- **Lack of urgency stands out**, with **38%** of patients citing it as a reason for delaying to seek medical care, making it the most common reason.
- Lack of time at **17%**, concerns about cost (**14%**) and the desire to avoid learning about possible diagnoses (**14%**) follow.
- **9%** of patients cite lack of transport as a reason.

The reasons for delay in seeking immediate help are the same for male and female patients, with lack of urgency being the most commonly reported

Q13. If you didn't seek help immediately, what was the reason for delaying seeking medical assistance?

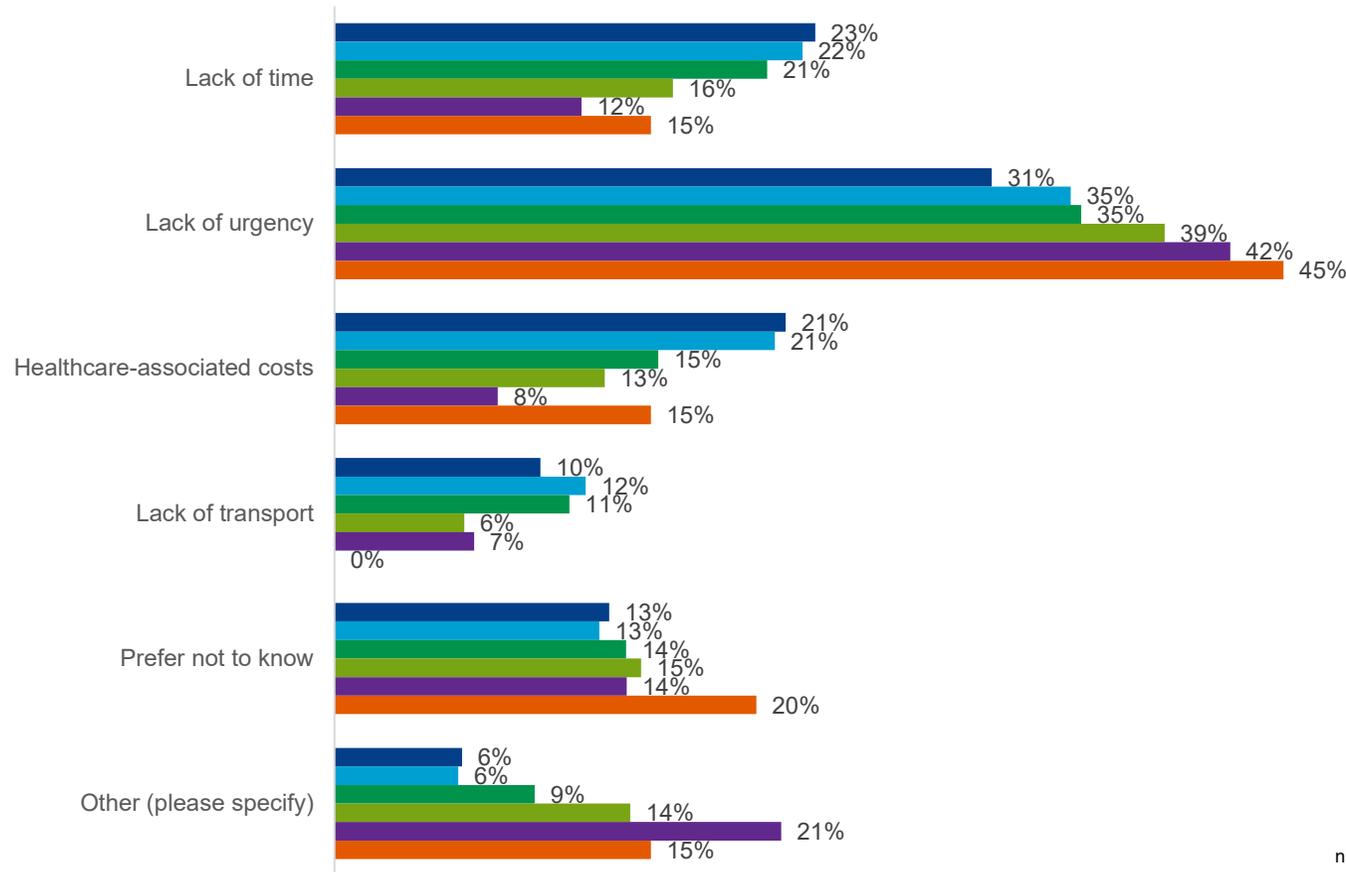


n = 2,,936

- For most reasons, there is no significant difference between female and male patients, however, 16% of female patients reported "other reasons" compared to 10% of male patients.

Lack of urgency is the top barrier to seeking timely care across all ages

Q13. If you didn't seek help immediately, what was the reason for delaying seeking medical assistance?

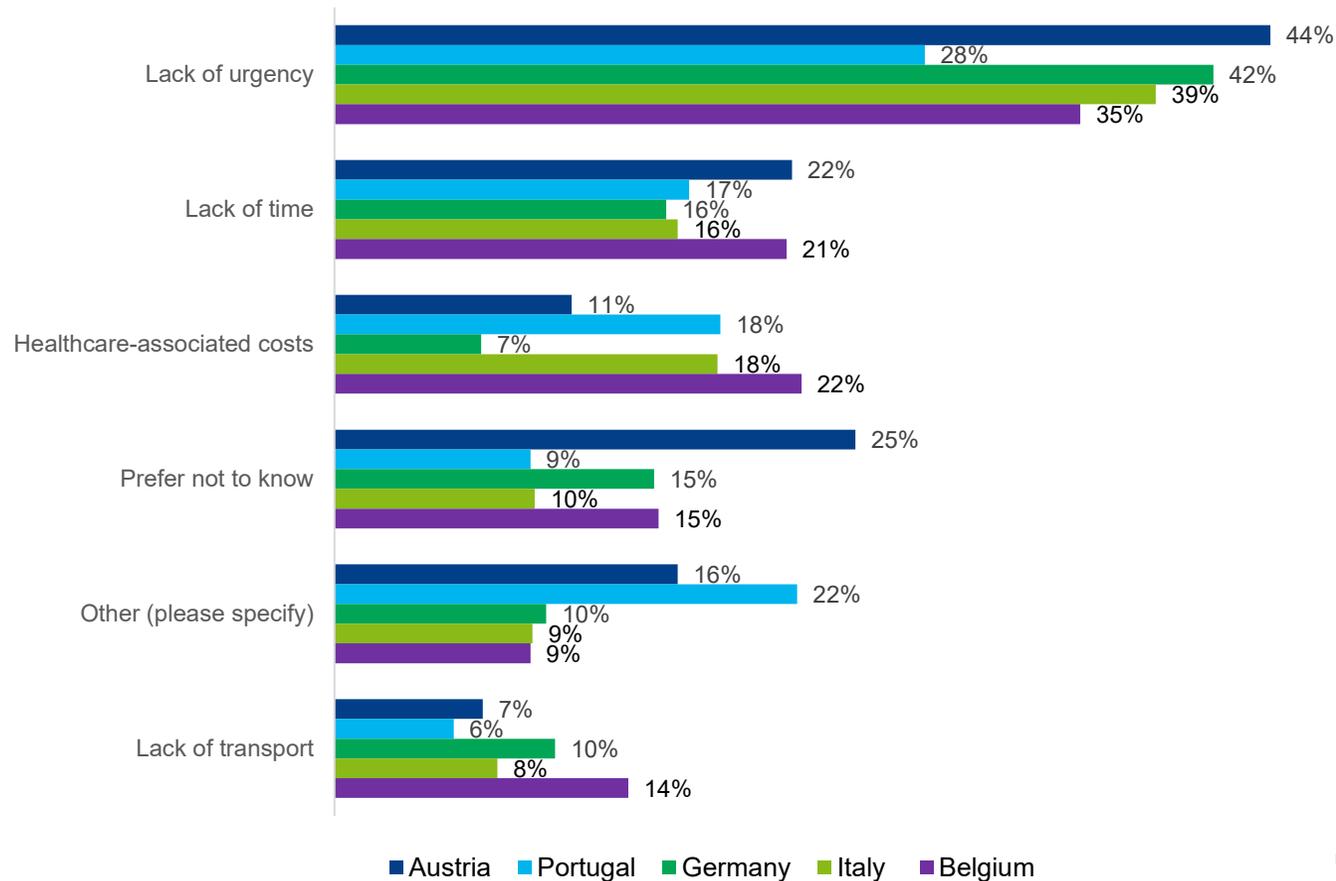


n = 2,936

- Between **39%** (<25) and **45%** (65+) cited “lack of urgency” as the **main reason for delaying medical assistance**.
- **Healthcare costs were the second most common barrier (15%–21%)**, peaking at **21%** in the youngest and oldest cohorts.
- Lack of “time” and “other” reasons each affected roughly one in five, with transport issues much less frequent (**6%–12%**).

Lack of urgency top barrier to seeking help across all markets

Q13. If you didn't seek help immediately, what was the reason for delaying seeking medical assistance?

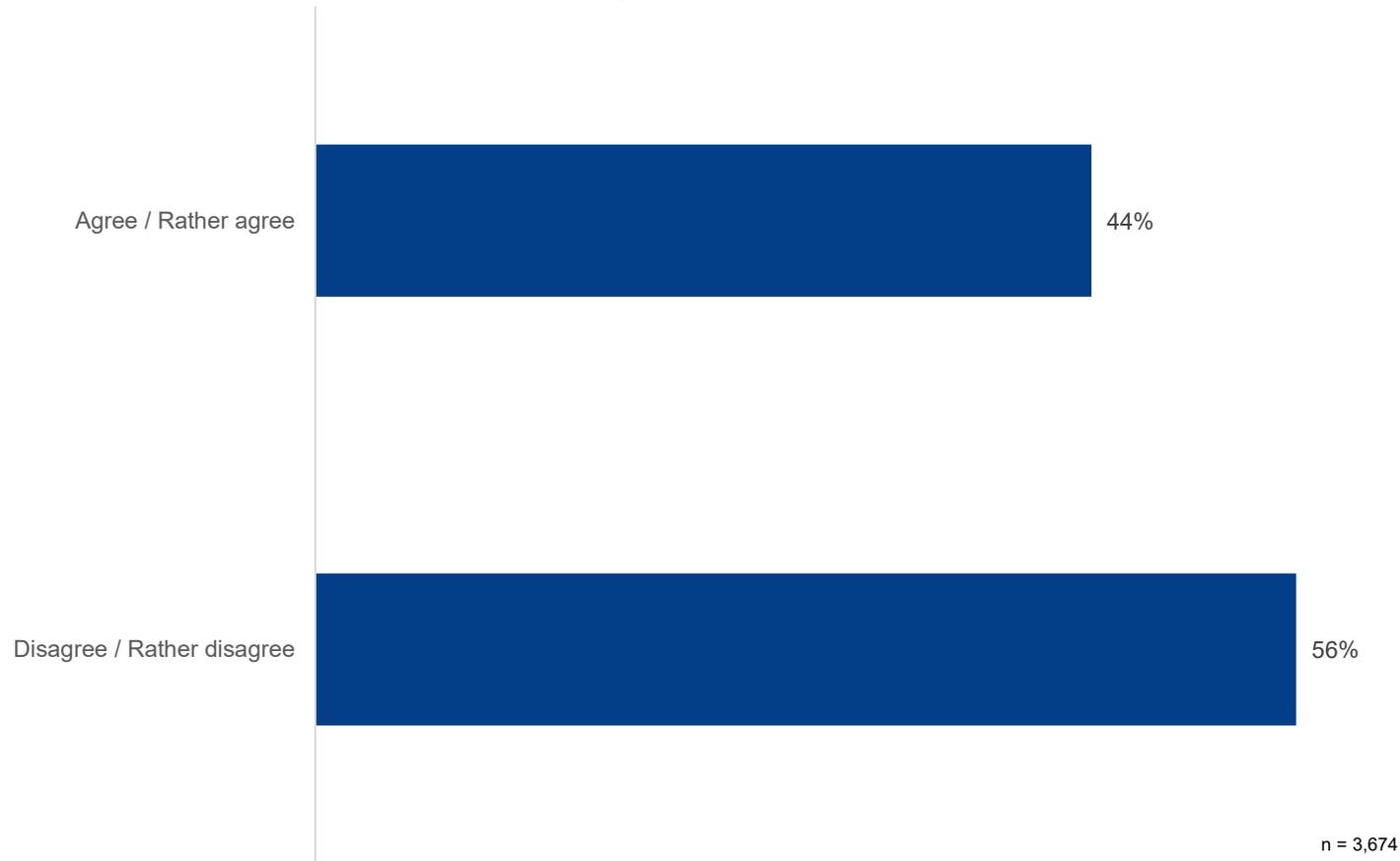


n = 2,,936

- **44%** of Austrians cited “lack of urgency” as their reason for delay—the highest among markets (Portugal **42%**, Germany **39%**, Italy **35%**, Belgium **28%**).
- “Lack of time” was the second most common excuse, led by Belgium (**21%**) and Austria (**17%**).
- **Cost concerns were relatively low but notable in Belgium (22%)** versus **7%–18%** elsewhere.

Nearly half of patients report reluctance to share heart health concerns for fear of not being taken seriously

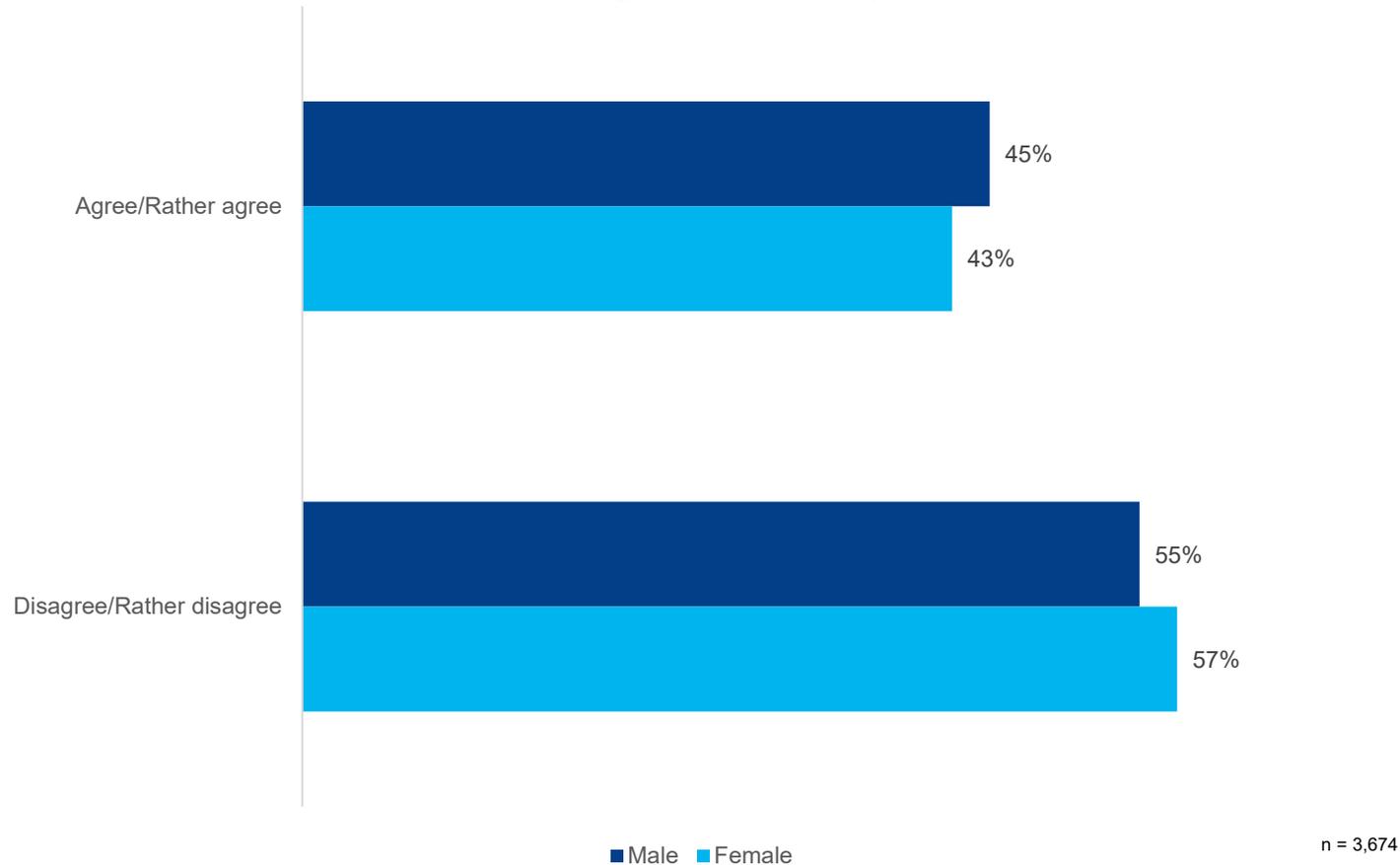
Q14. How much do you agree with the following statement: I have felt reluctant to discuss my cardiovascular health symptoms and/or problems with my physician or healthcare provider for fear of not being taken seriously.



- **56%** of patients disagrees or strongly disagrees that **they had felt reluctant to discuss cardiovascular concerns for fear of not being taken seriously.**
- **44%** agree or somewhat agree that they had felt this reluctance.

Male patients are slightly more reluctant to share cardiovascular health symptoms or problems with their physician or healthcare provider

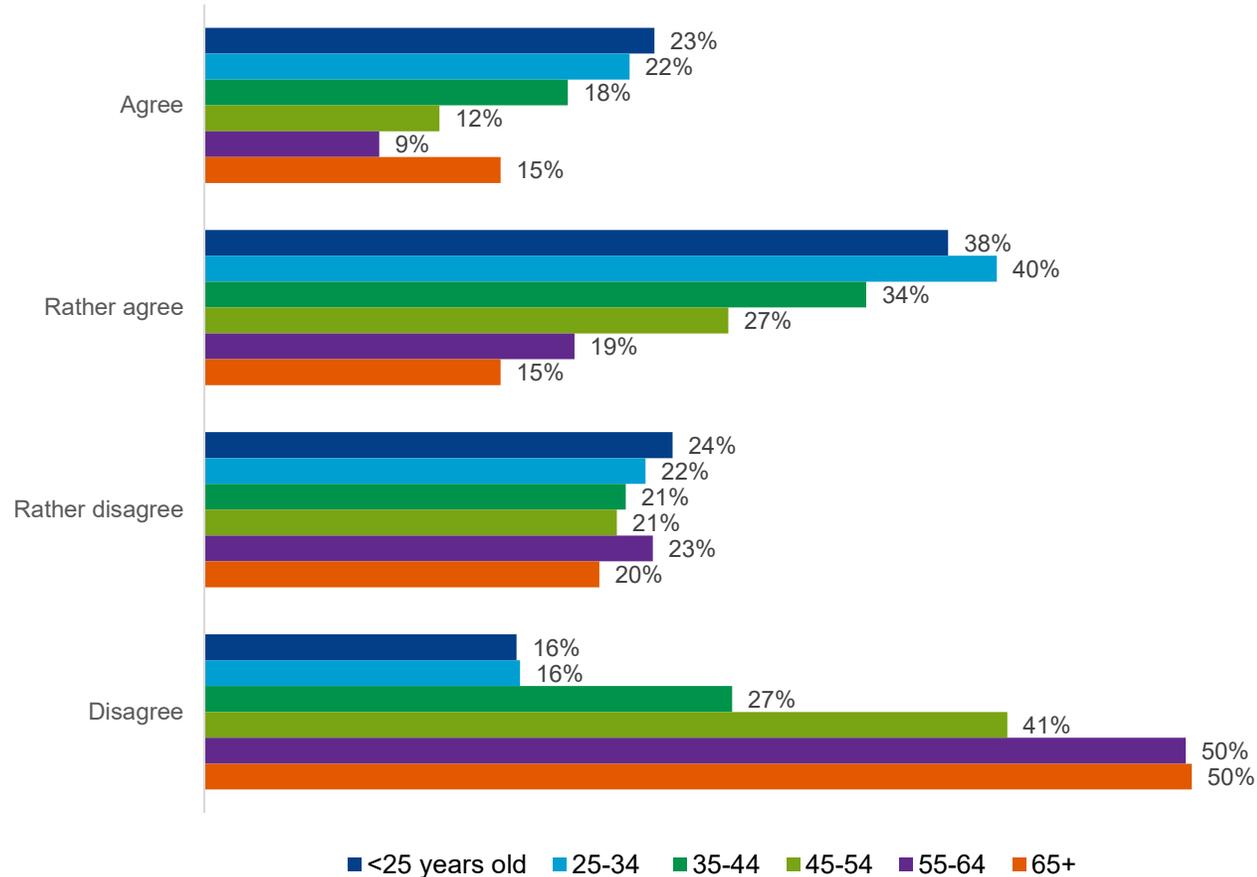
Q14. How much do you agree with the following statement: I have felt reluctant to discuss my cardiovascular health symptoms and/or problems with my physician or healthcare provider for fear of not being taken seriously.



- **More than half of patients** report that they are reluctant to share their heart health concerns for fear of not being taken seriously.
- While the difference between male and female patients is not large, it is noticeable **that male patients are slightly more likely to report this behavior.**

Young adults show highest reluctance to discuss symptoms with their physician

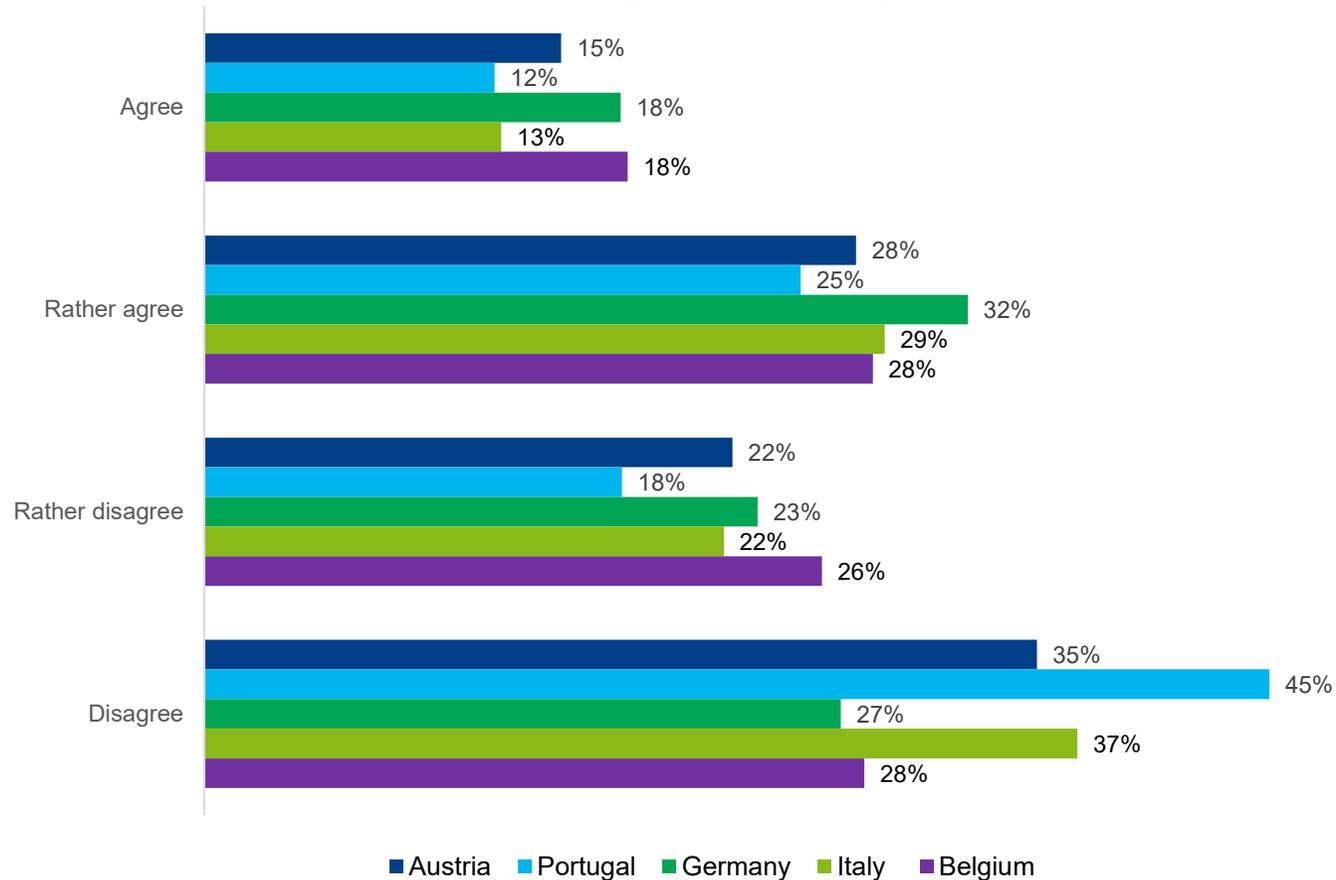
Q14. How much do you agree with the following statement: I have felt reluctant to discuss my cardiovascular health symptoms and/or problems with my physician or healthcare provider for fear of not being taken seriously.



- **38%–40%** of respondents under 35 “rather agree” they’ve felt reluctant to raise cardiovascular concerns.
- Only **9%–15%** of those aged 55+ “agree” they felt reluctant, and **half of seniors (50%)** outright “disagree”.
- **Overall, disagreement (feeling able to speak up) rises steadily with age, from 16% in under-25s to 50% in 55+ cohorts**

Most people feel comfortable discussing symptoms, though reluctance peaks in Italy and Portugal

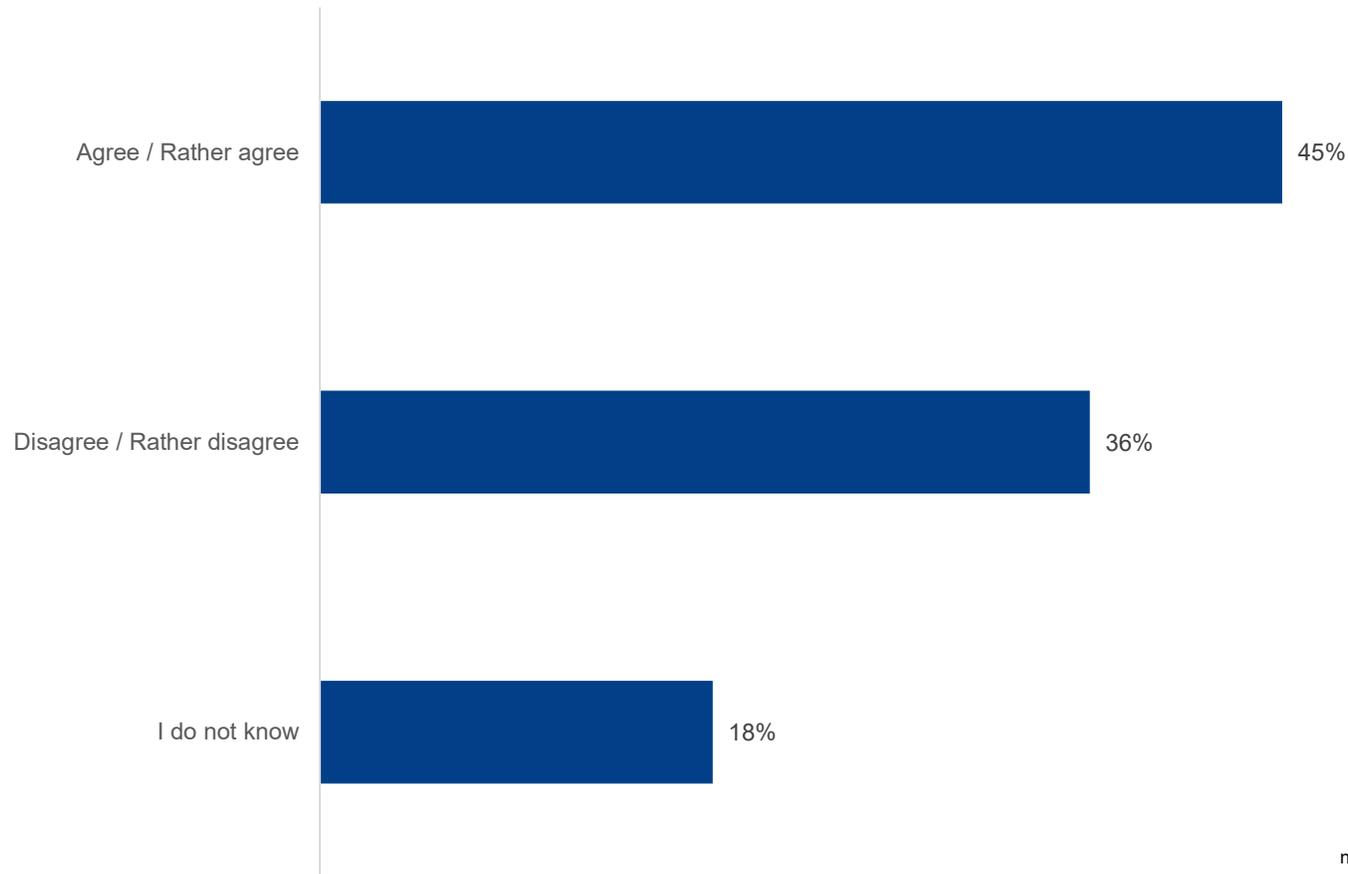
Q14. How much do you agree with the following statement: I have felt reluctant to discuss my cardiovascular health symptoms and/or problems with my physician or healthcare provider for fear of not being taken seriously.



- **35%–45%** of respondents “disagree” that they feel reluctant to discuss cardiovascular concerns, **with Portugal highest at 45% and Germany lowest at 27%.**
- **28%–32%** “rather agree” they’ve felt reluctant, led by Italy (**32%**) and Germany (**29%**).
- Only **12%–18%** fully “agree” they’ve been reluctant, **indicating most patients are generally comfortable raising issues.**

44% of patients recognize gender differences in cardiovascular care, while 1 in 3 do not

Q15. How much do you agree with the following statement: Women experience different treatment / therapeutic response for cardiovascular health compared to men.

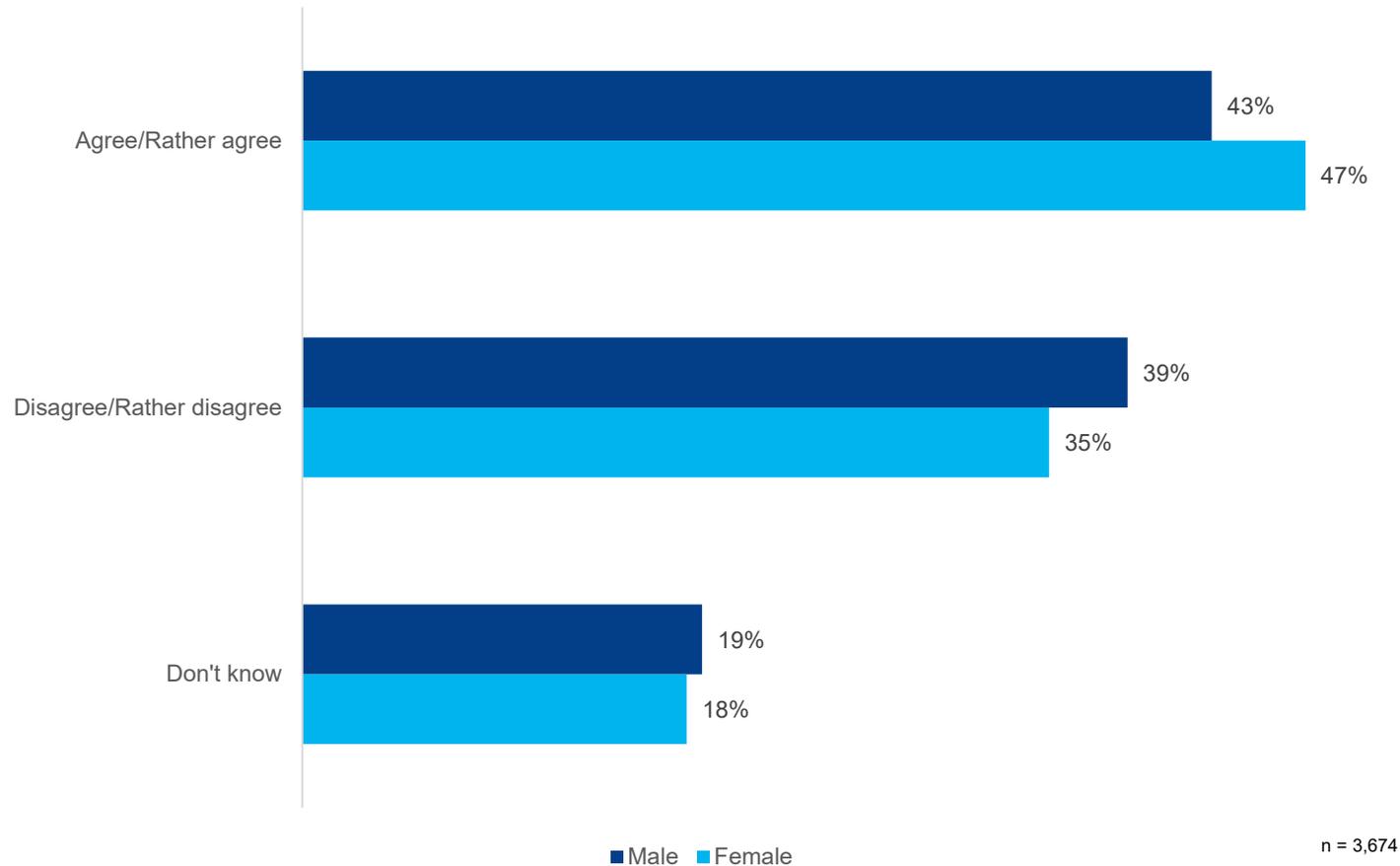


- **45%** of respondents agree or strongly agree that women experience different cardiovascular treatment/therapeutic responses compared to men.
- **36%** of respondents disagree or strongly disagree with this statement.

n = 3,674

Women experience different heart treatment – both genders agree

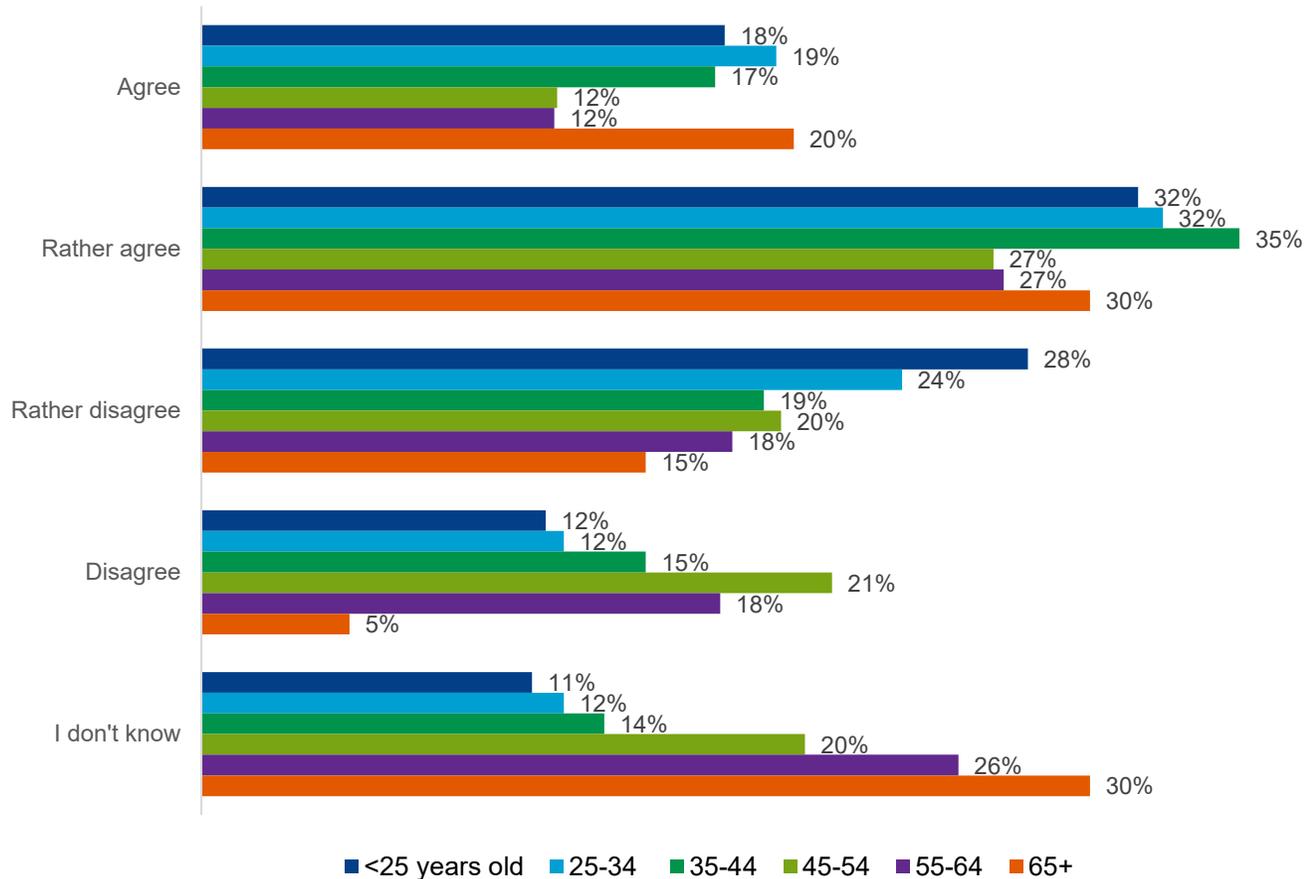
Q15. How much do you agree with the following statement: Women experience different treatment / therapeutic response for cardiovascular health compared to men.



- While most patients agree or strongly agree that women experience a different treatment or therapeutic response for cardiovascular health compared to men, **the proportion of female patients is slightly higher with 47%, compared to 43% in male patients.**

Young and middle-aged adults most convinced women face different cardiovascular treatment

Q15. How much do you agree with the following statement: Women experience different treatment / therapeutic response for cardiovascular health compared to men.

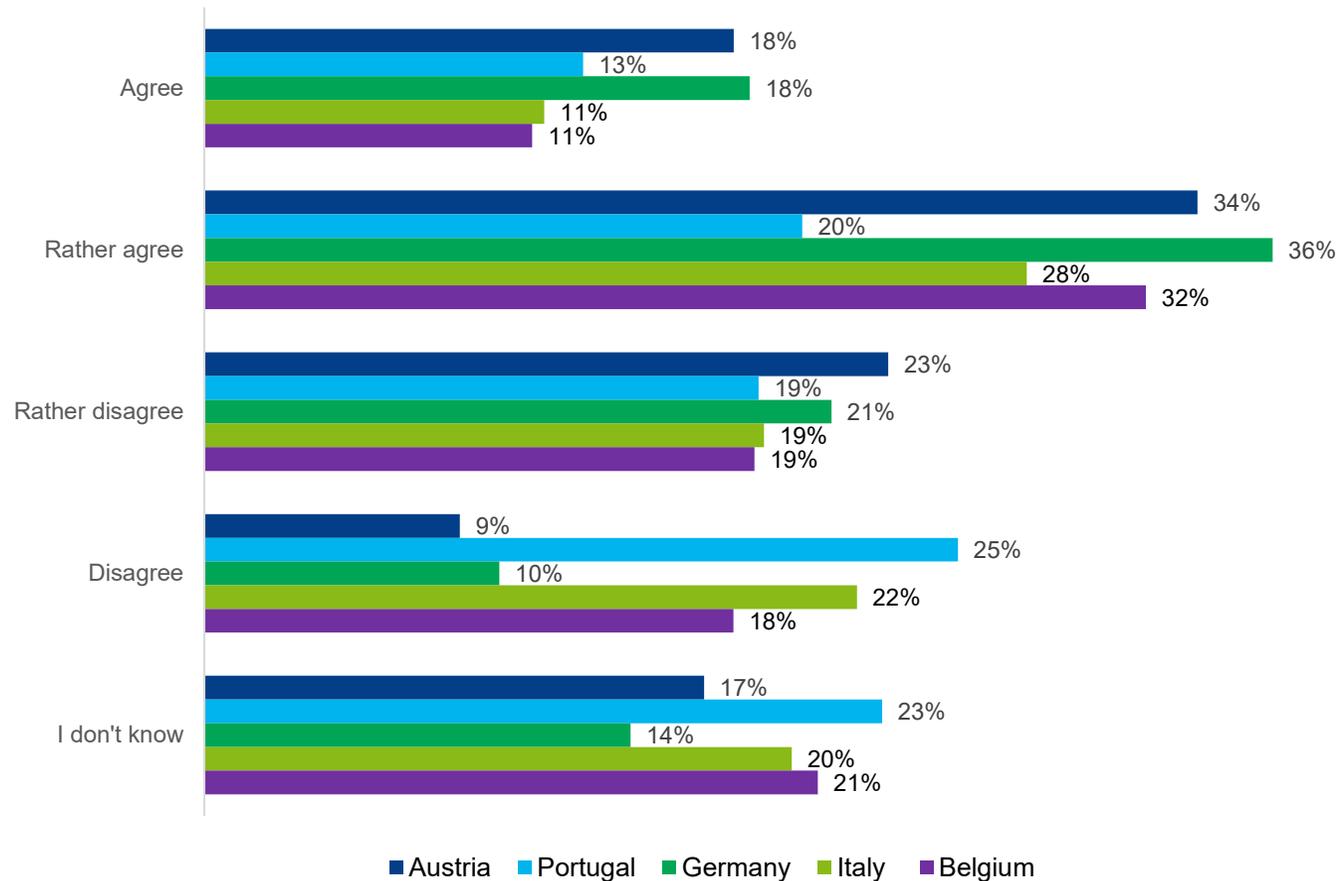


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- The 35–44 cohort shows the strongest “rather agree” response (35%) that women experience different treatment/therapeutic response compared to men.
- Under-25s and 25–34s also lean toward agreement, with 32% in each group selecting “rather agree”.
- Seniors (65+) are the most uncertain, with 30% choosing “I don’t know,” and only 20% “agree”.

Perceptions of gender-based treatment vary significantly across Europe

Q15. How much do you agree with the following statement: Women experience different treatment / therapeutic response for cardiovascular health compared to men.

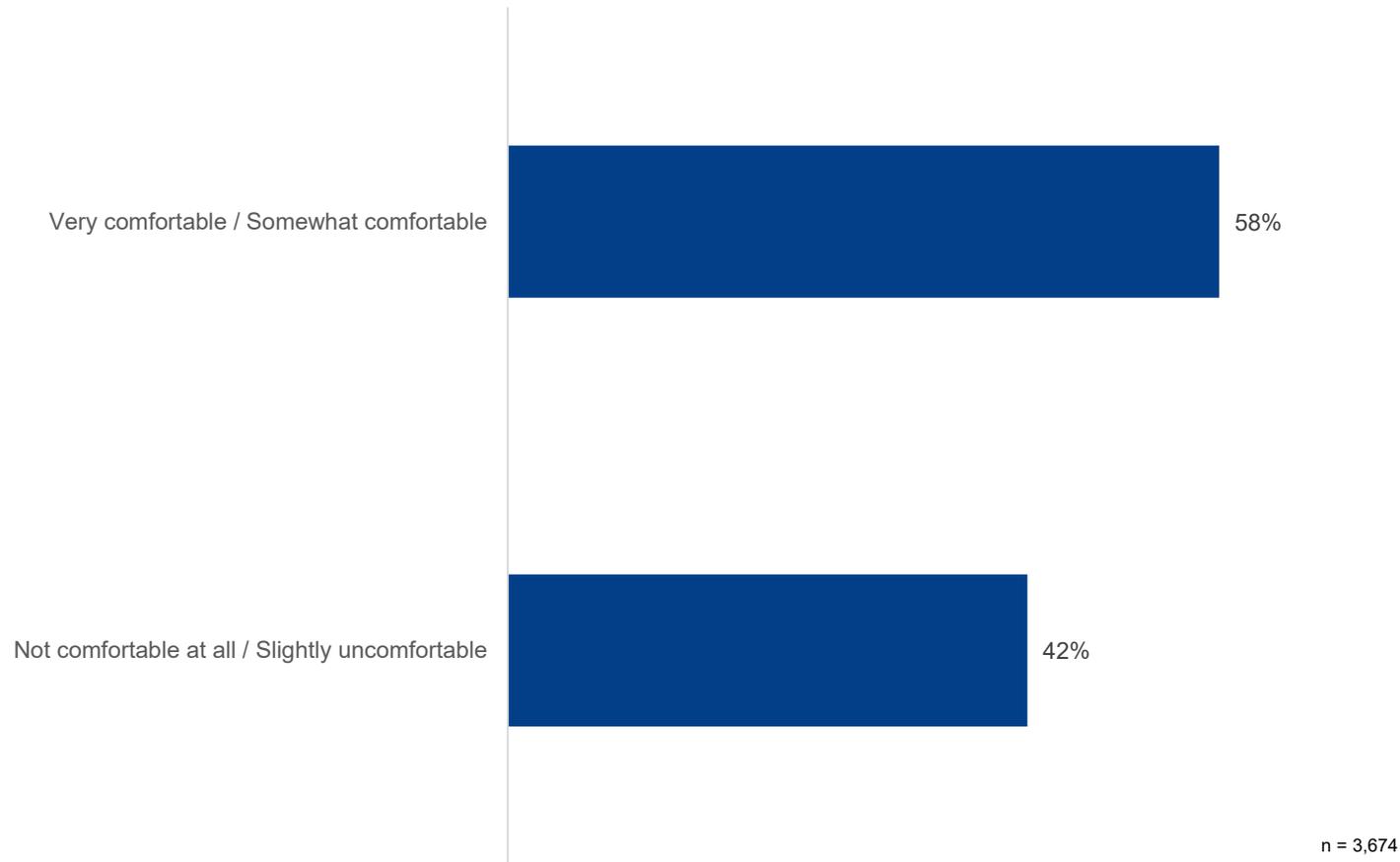


n = 3,674

- Highest “rather agree” in Germany (**36%**) and Austria (**34%**), indicating strong belief in differential treatment.
- Portugal shows lower “agree” at **13%**, while Austria and Germany lead at **18%**.
- Notably, Portugal has the highest “don’t know” (**23%**), **suggesting greater uncertainty about gender differences in cardiovascular care.**

4 out of 10 patients feel uncomfortable disclosing their cardiovascular conditions with friends and family members

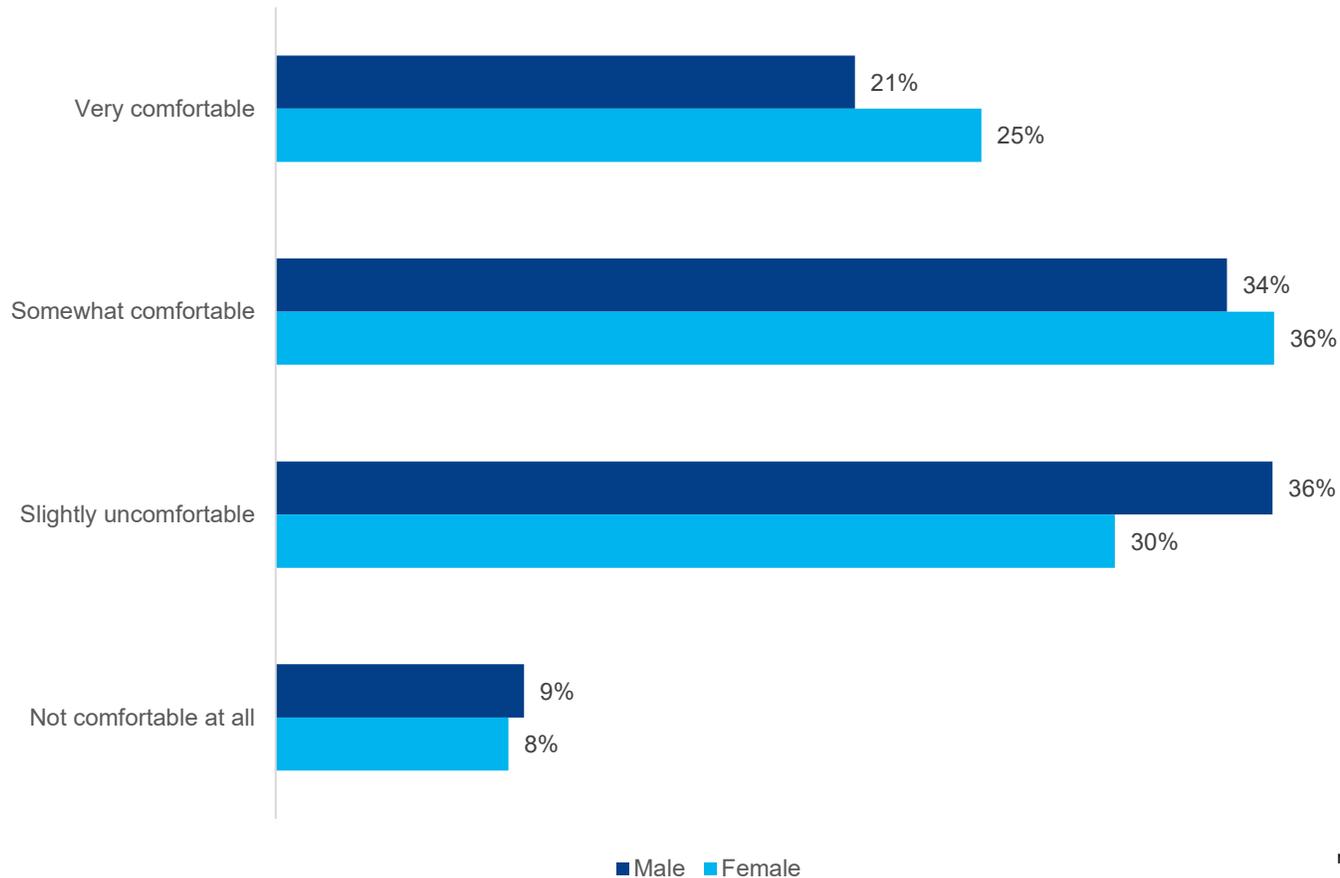
Q16. If you had a cardiovascular condition, how comfortable were/would you be disclosing it to your friends and family?



- A majority (**58%**) of respondents **reported feeling very or somewhat comfortable** disclosing a cardiovascular condition to friends and family.
- **4 out of 10** patients said they are feeling uncomfortable sharing such information.

While most patients are willing to disclose their cardiovascular condition, male patients tend to be more reluctant

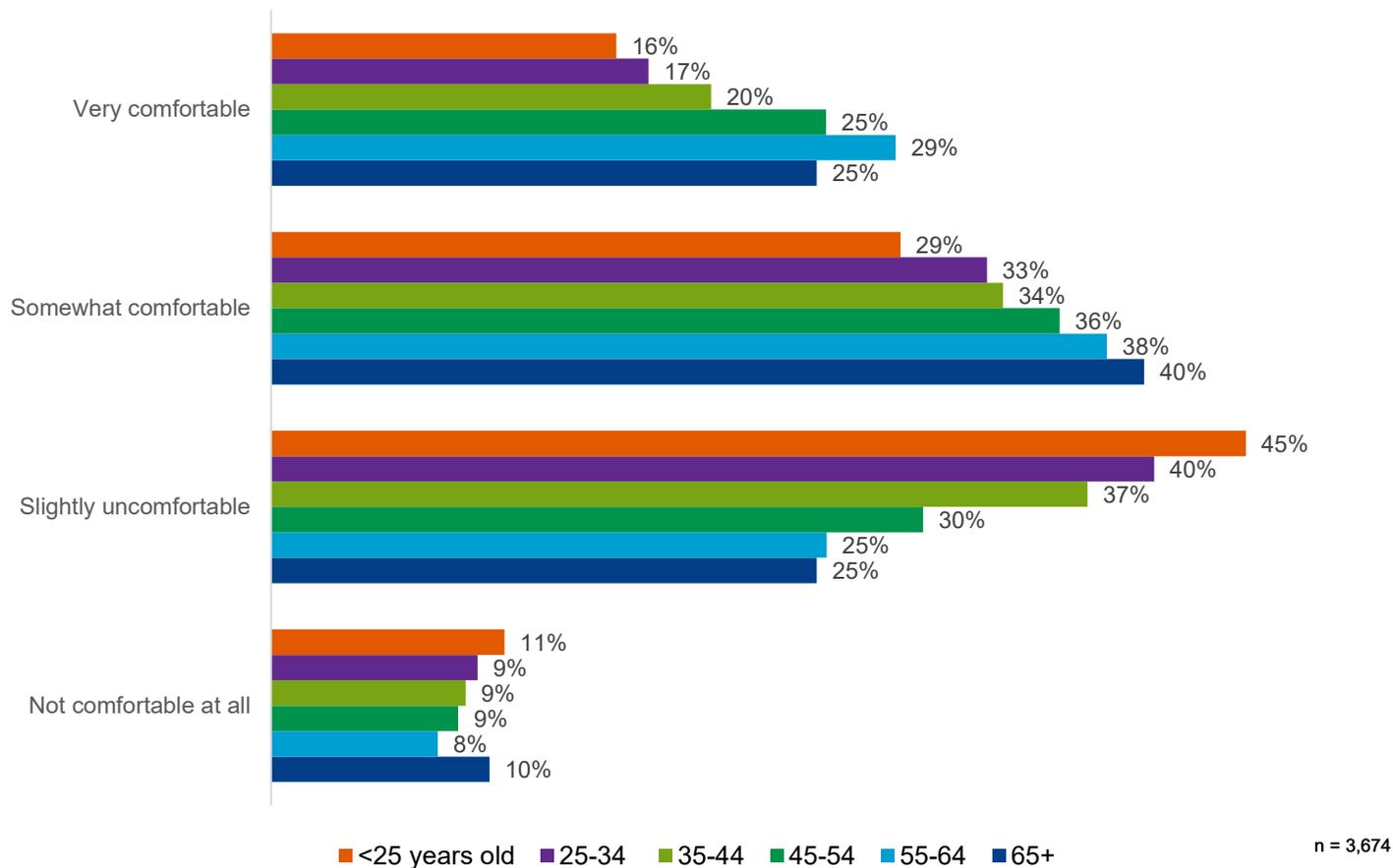
Q16. If you had a cardiovascular condition, how comfortable were/would you be disclosing it to your friends and family?



- **45%** of male patients express (slight) discomfort in disclosing their cardiovascular condition to family and friends, compared to **38%** of female patients.
- **Female patients report feeling more comfortable sharing their condition with family and friends**, with **61%** saying they feel at least somewhat comfortable, compared to **55%** of male patients.

Comfort levels vary by age when sharing a heart condition with friends and family

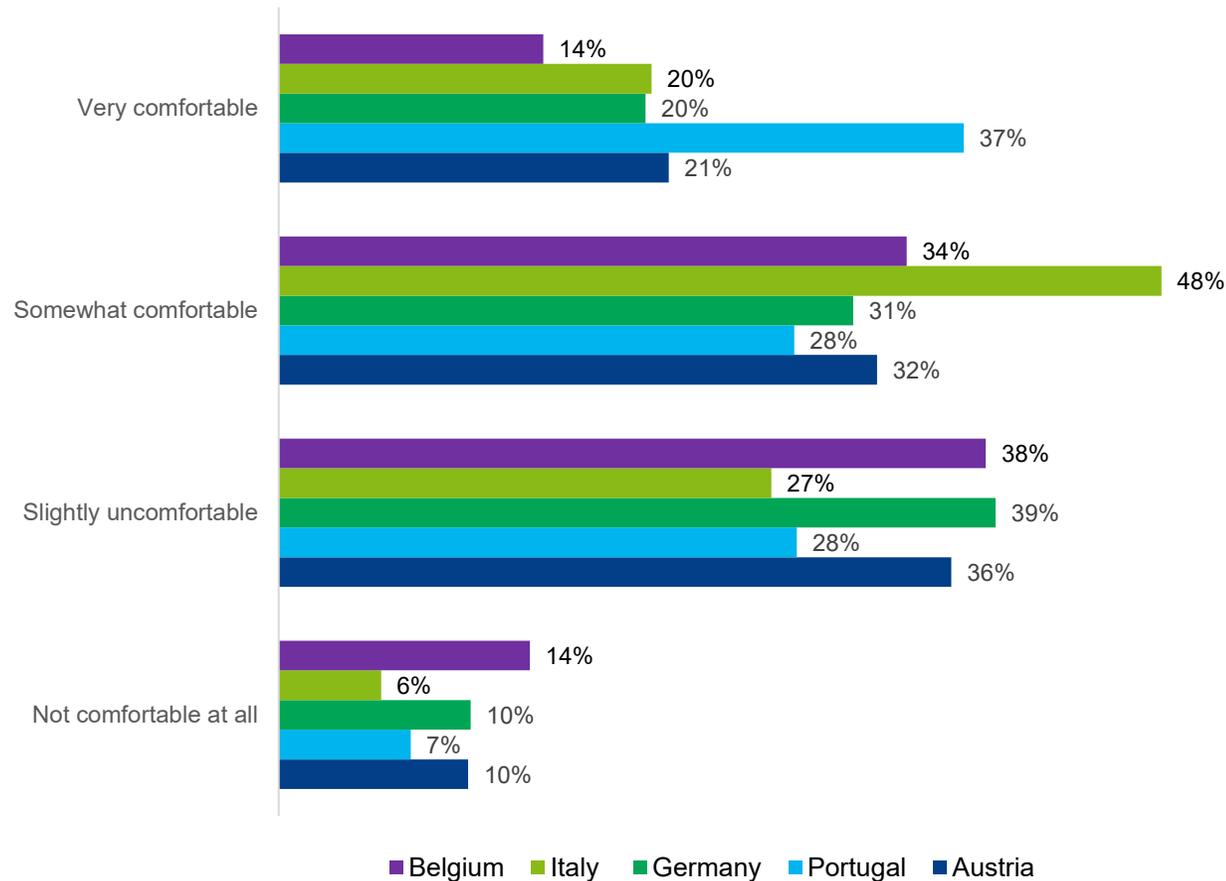
Q16. If you had a cardiovascular condition, how comfortable were/would you be disclosing it to your friends and family?



- **Younger adults (<25) are most hesitant:** 45% feel slightly uncomfortable and only 16% very comfortable disclosing a cardiovascular condition.
- **Comfort rises with age:** 65+ respondents report highest “somewhat comfortable” (40%) and moderate “very comfortable” (25%) levels.
- Across all groups, a minority (8–11%) feel “not comfortable at all,” peaking at 11% in the youngest cohort.

Physicians' explanations are clear for most, especially in Italy and Portugal

Q16. If you had a cardiovascular condition, how comfortable were/would you be disclosing it to your friends and family?

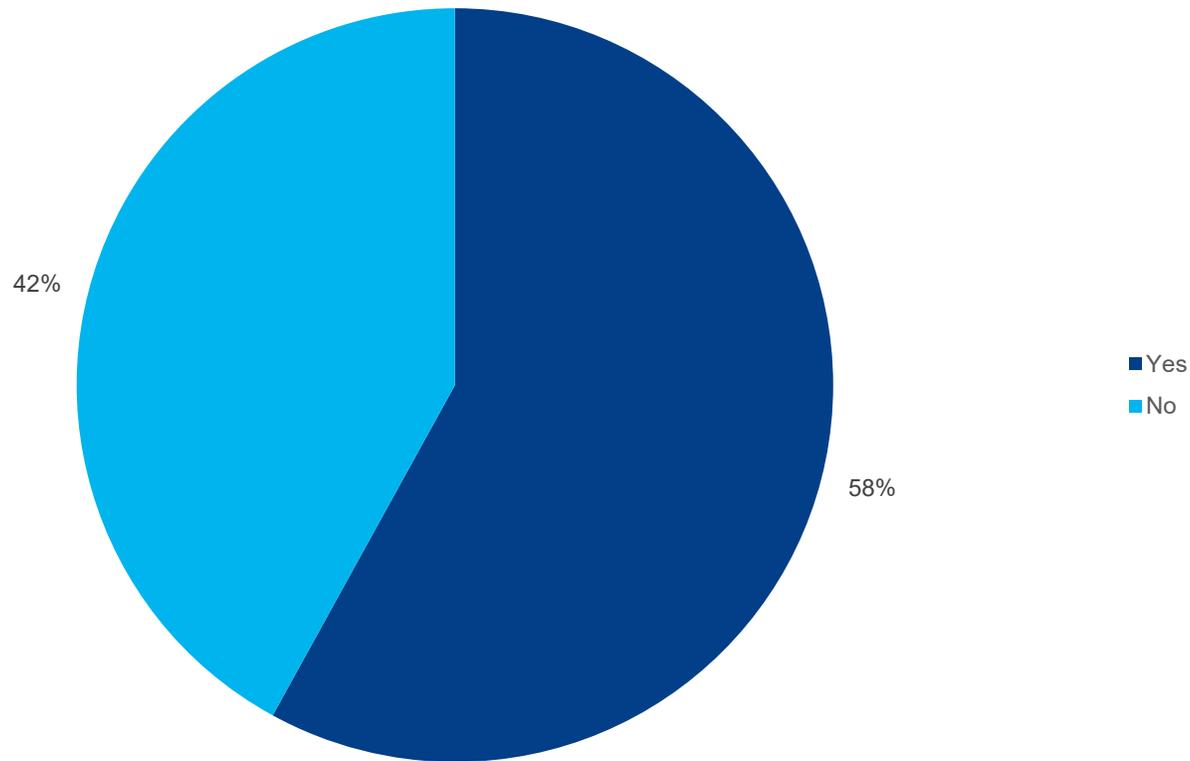


n = 3,674

- In Portugal, **54%** agree strongly that **providers communicate understandably (highest)**, while Belgium is lowest at **32%**.
- Combining agree and rather agree, Italy leads at **~90%**, followed by Belgium (**85%**), Germany (**83%**), Portugal (**85%**) and Austria (**~77%**).
- Only around **10%** overall rather disagree or disagree, **indicating broad satisfaction across all markets.**

6 out of 10 patients receive cardiovascular risk counseling based on age and health status, but a significant minority remains unaddressed

Q17. Has your doctor offered you any dedicated advice or support to talk about your risk of cardiovascular disease due to your age/health status?

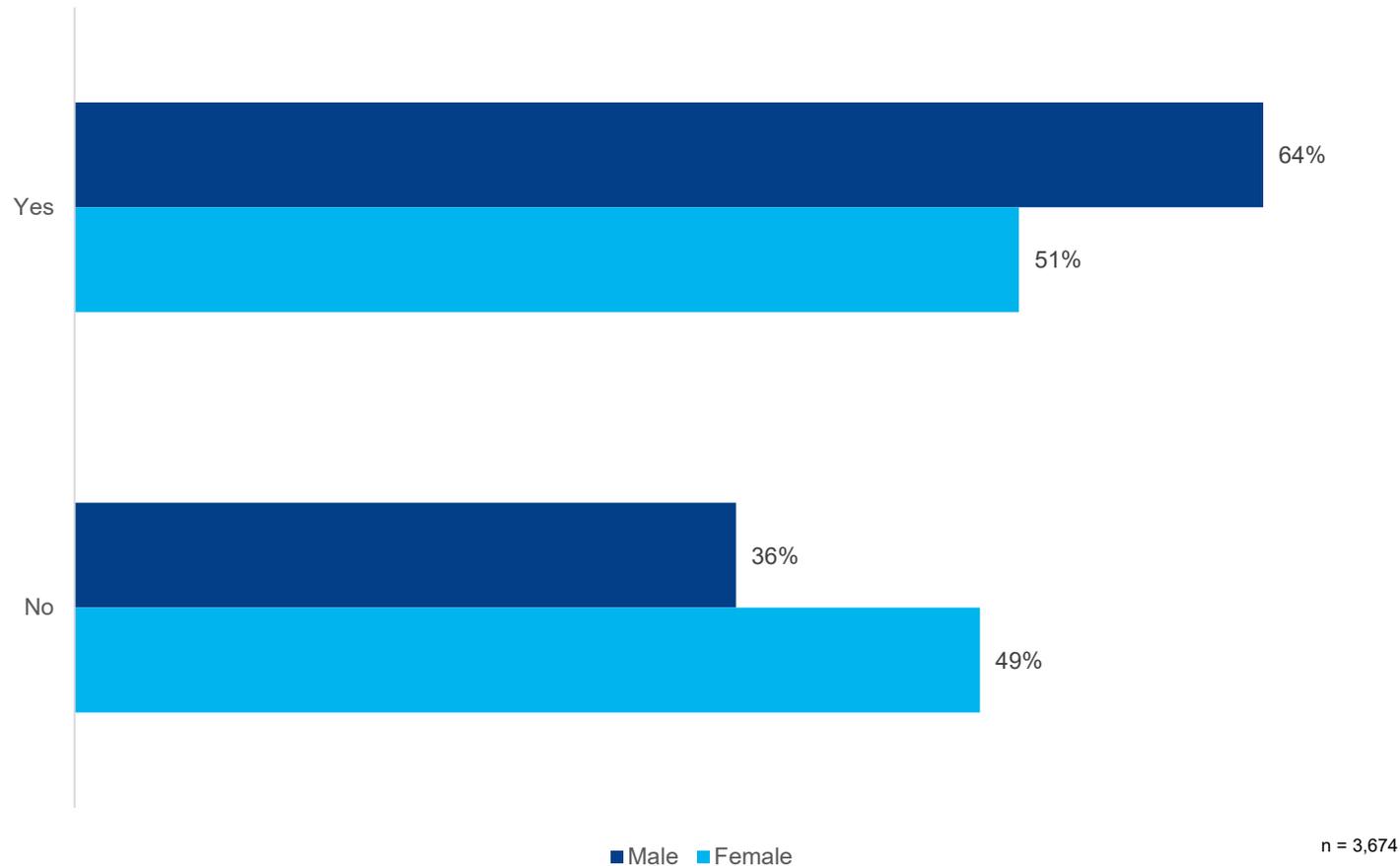


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- **58%** of patients reported that their physician offered specific advice or support to discuss cardiovascular disease risk.
- **42%** said they had not received any specific advice about their risk.
- While a clear majority have had proactive discussions with their physician, **a significant minority still lack personalised support for cardiovascular health concerns.**

Only half of female patients to receive specific counseling about age and health risks from their doctor

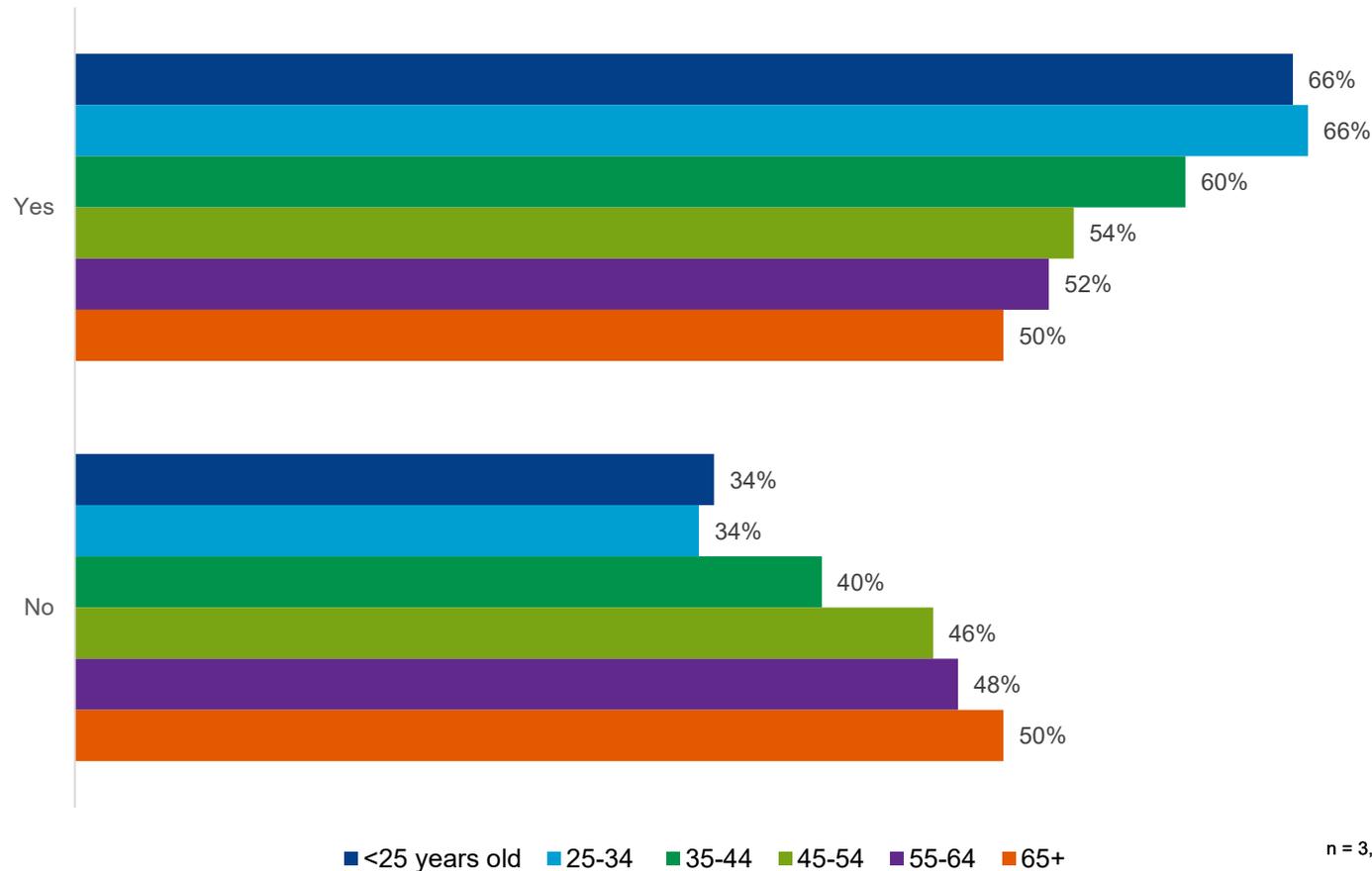
Q17. Has your doctor offered you any dedicated advice or support to talk about your risk of cardiovascular disease due to your age/health status?



- **Two out of three** male patients say they have been offered specific advice or support to talk about their risk of cardiovascular disease due to their age/health status, **compared to only half of female patients.**

Doctor support highest among under-35s, this declines with age

Q17. Has your doctor offered you any dedicated advice or support to talk about your risk of cardiovascular disease due to your age/health status?

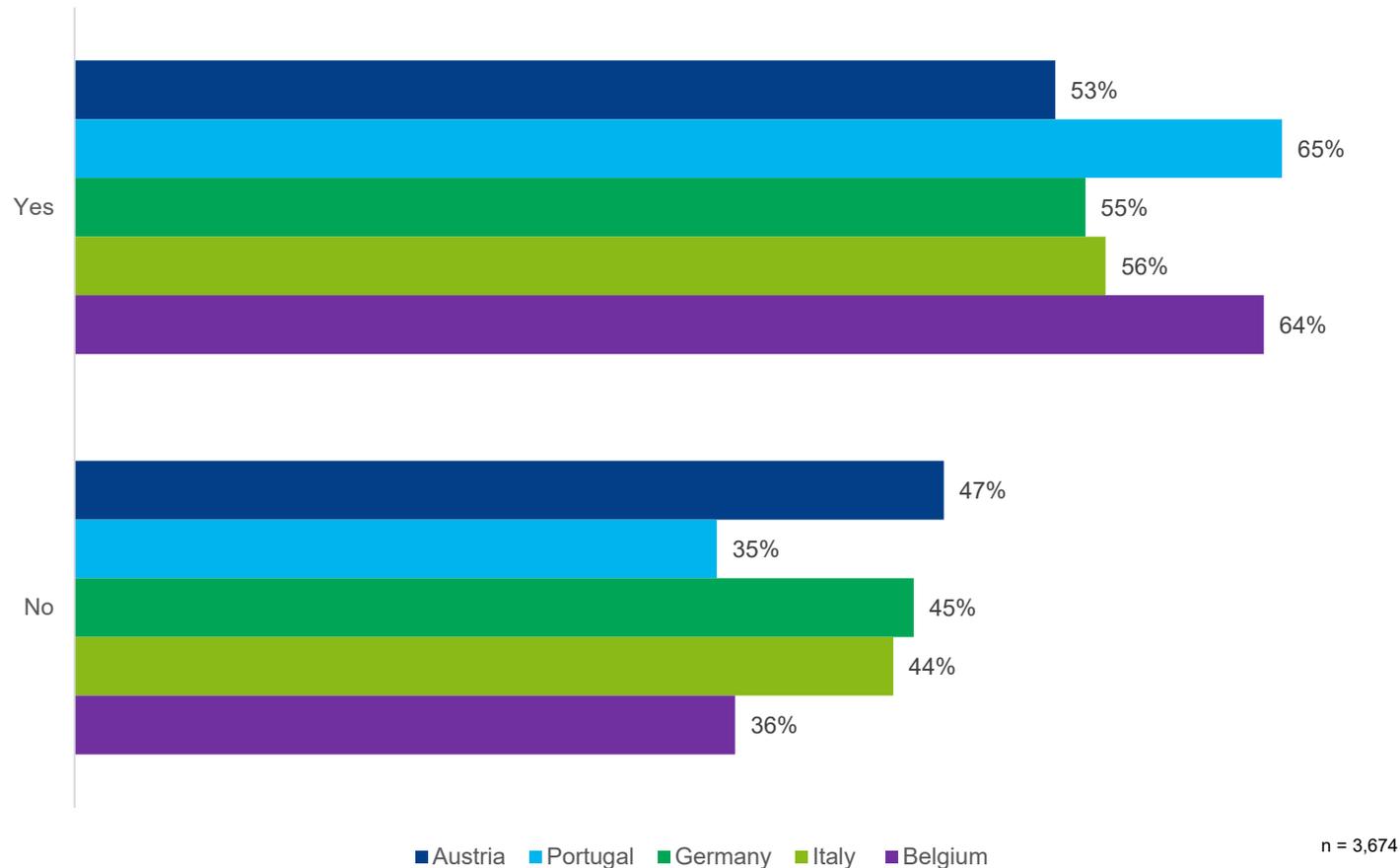


- **Two-thirds of patients under 35 (66%)** report receiving dedicated advice on cardiovascular risk from their doctor.
- That share falls steadily: **60%** (35–44), **54%** (45–54), and **~50%** in those 55 and older.
- **Even in the oldest group, half still receive age-related cardiovascular guidance.**

n = 3,674

Doctors in Portugal and Belgium lead in proactive cardiovascular advice

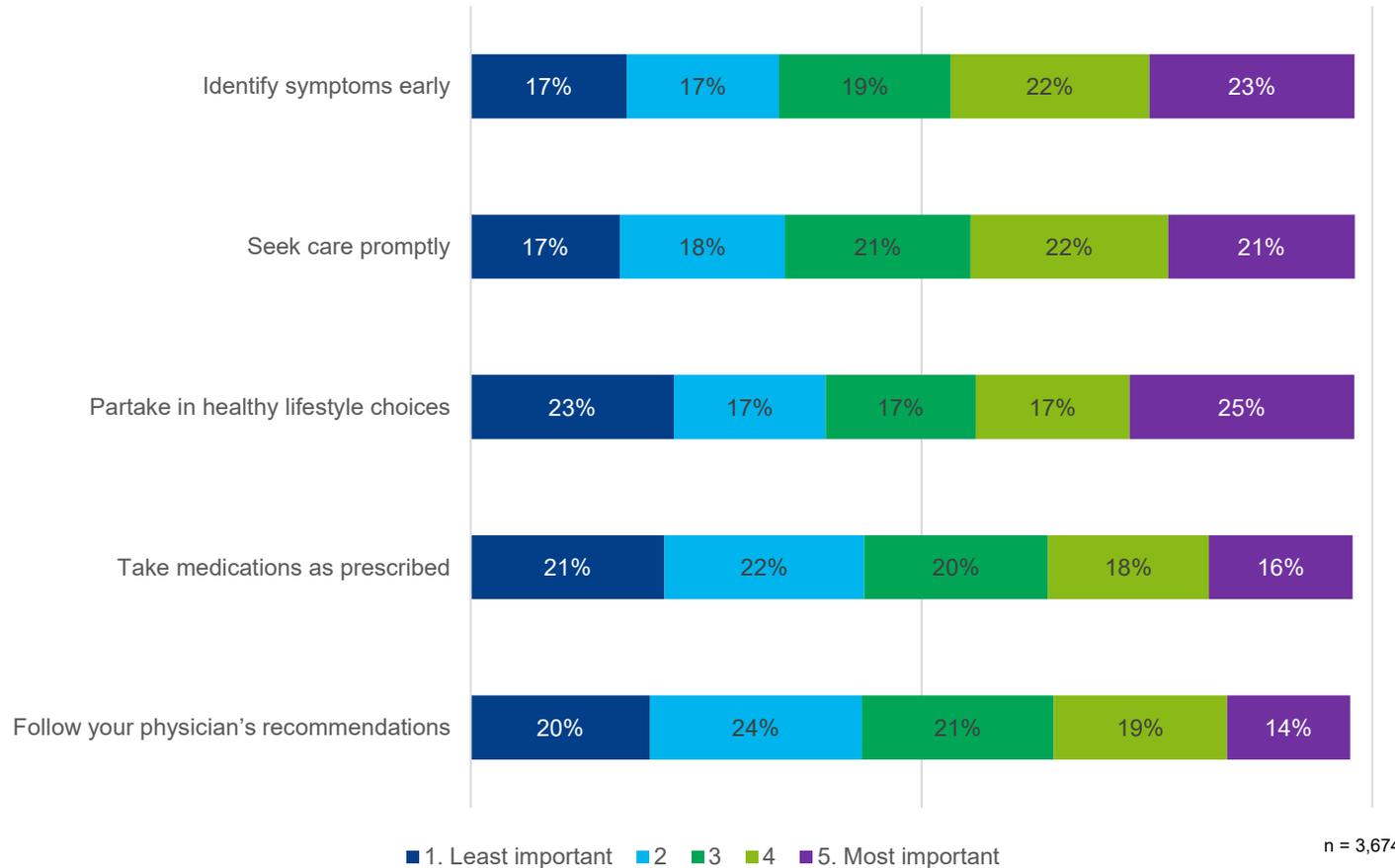
Q17. Has your doctor offered you any dedicated advice or support to talk about your risk of cardiovascular disease due to your age/health status?



- **A majority of Portuguese (65%) and Belgian (64%)** patients report receiving dedicated guidance on cardiovascular risk.
- Italy (56%) and Germany (55%) follow closely, while Austria lags at 53%.
- Conversely, nearly half of Austrians (47%), Germans (45%), and Italians (44%) say **they did not receive such support.**

Healthy habits take top priority in perceived heart health strategies

Q18. How important do you think the following factors are for good cardiovascular health? Please rate each factor from 1 to 5 – 1 being the least important and 5 being the most important.

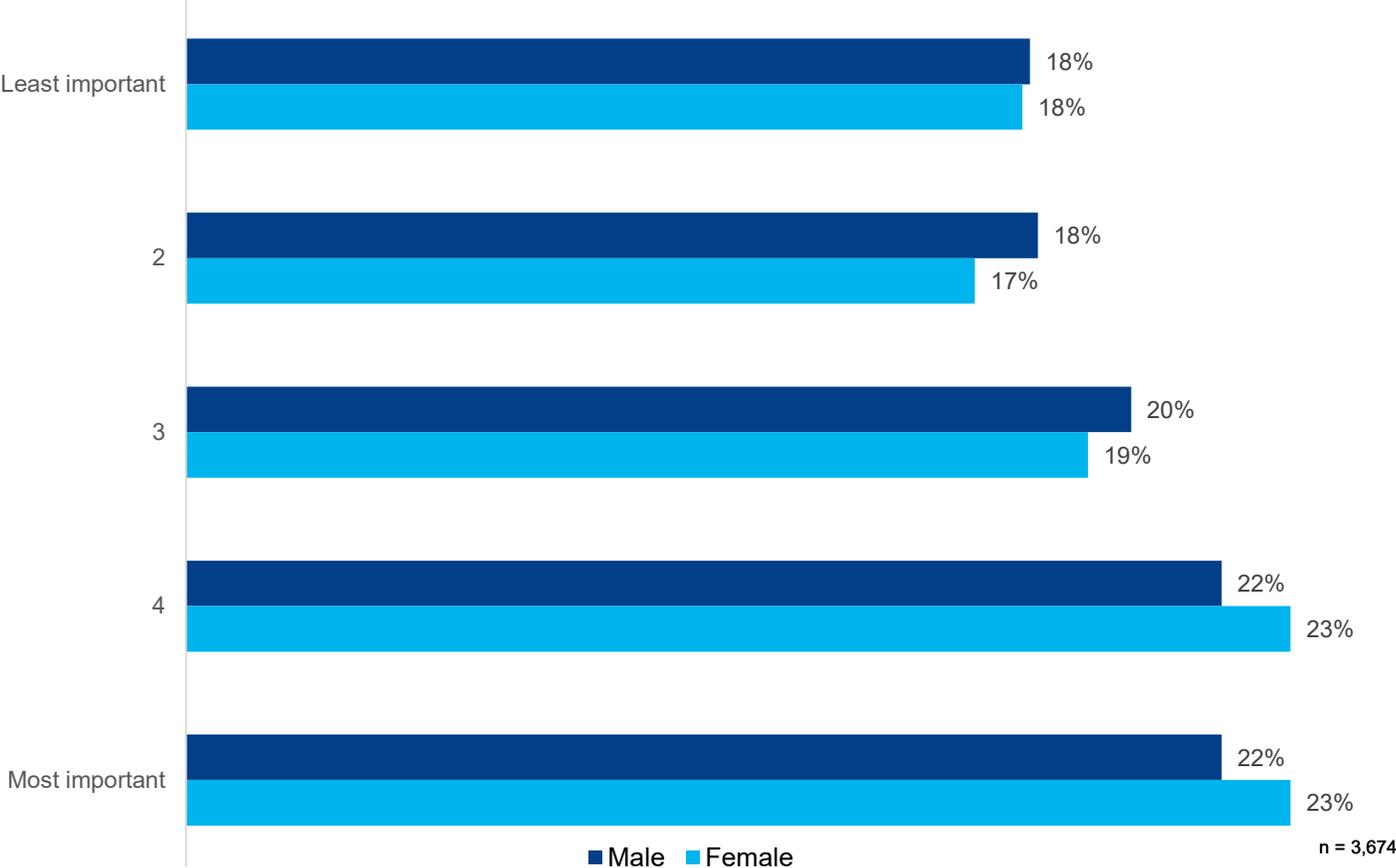


- **"Identify symptoms early" shows a balanced distribution across all importance levels**, with **17%** of patients selecting it as least important and **23%** selecting it as most important.
- "Seek care promptly" also skews toward the higher end, **with nearly a quarter (22%) of patients selecting a 4 and 21% selecting a 5.**
- "Follow your physician's recommendations" and "Take medications as prescribed" receive slightly higher shares with lower importance ratings, **indicating a more moderate perception of these factors.**
- "Partake in healthy lifestyle choices" stands out for receiving the highest proportion of 5 (**25%**), **underscoring the strong emphasis respondents place on proactive self-care measures.**

Both men and women rank early symptom identification as important



Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Identify symptoms early “ from 1 to 5 – 1 being the least important and 5 being the most important.

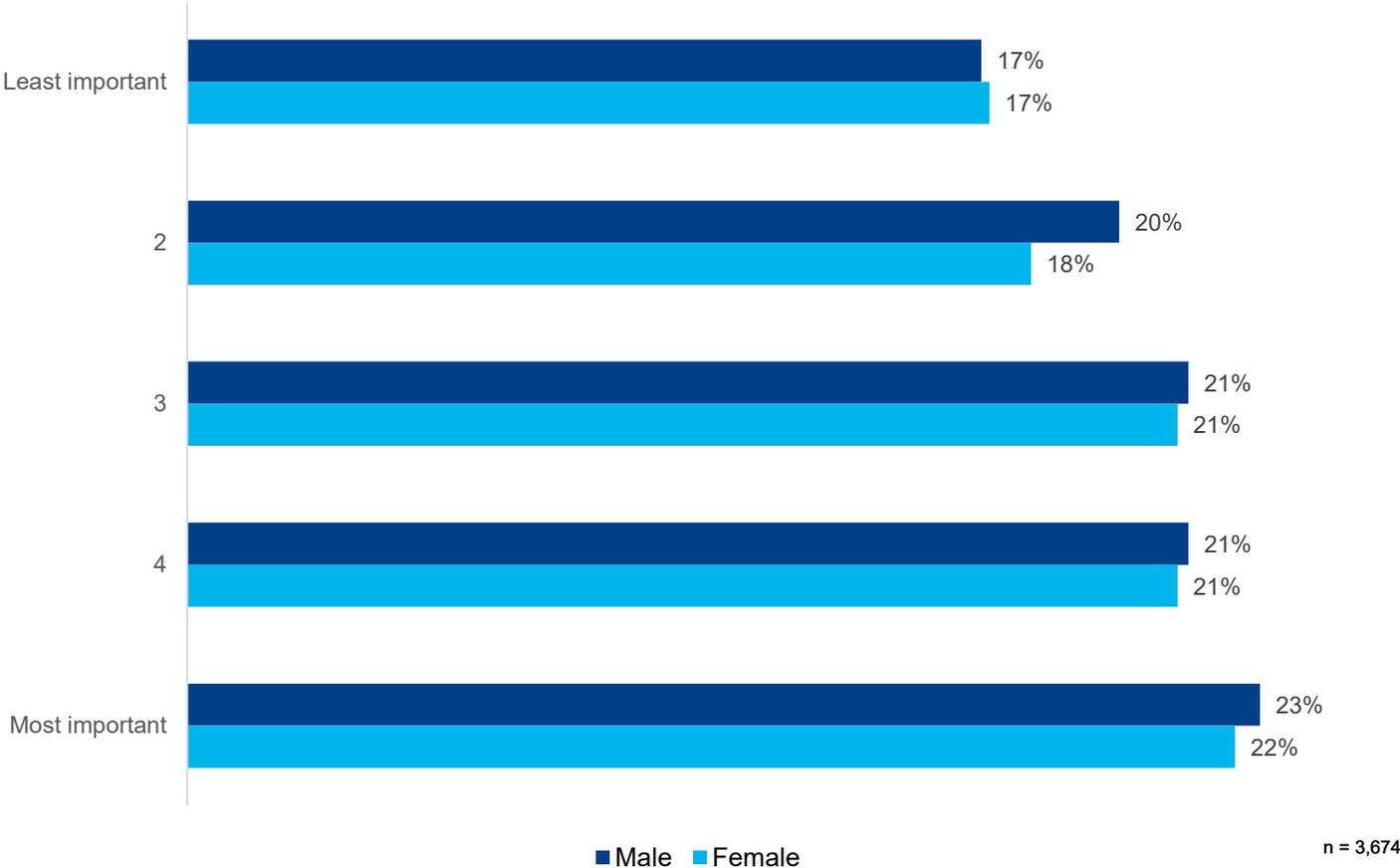


- 23% of women and 22% of men rate “identify symptoms early” as most important (5/5).
- Another 23% of women and 22% of men give it a 4 out of 5.
- Just 18% of both genders consider it the least important (1/5).

Seek care promptly is seen as important by both genders



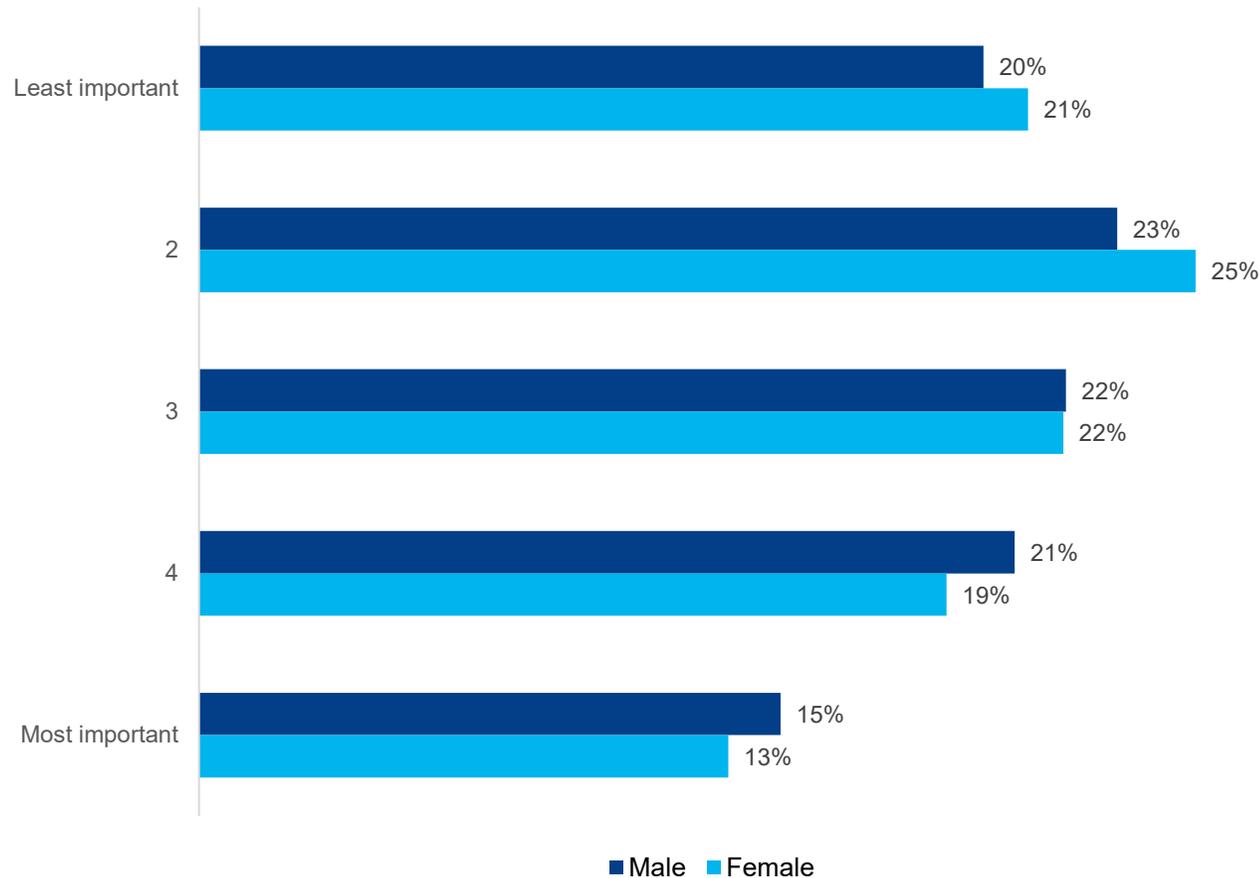
Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Seek care promptly” from 1 to 5 – 1 being the least important and 5 being the most important.



- **23%** of men and **22%** of women rate seeking care promptly as most important (5/5).
- **21%** of both men and women give it a 4 out of 5, and another **21%** rate it a mid-level 3.
- Only **17%** of each gender consider it least important (1/5).

Follow your physician's recommendations is seen as less important by both genders

Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor "Follow your physician's recommendations" from 1 to 5 – 1 being the least important and 5 being the most important.

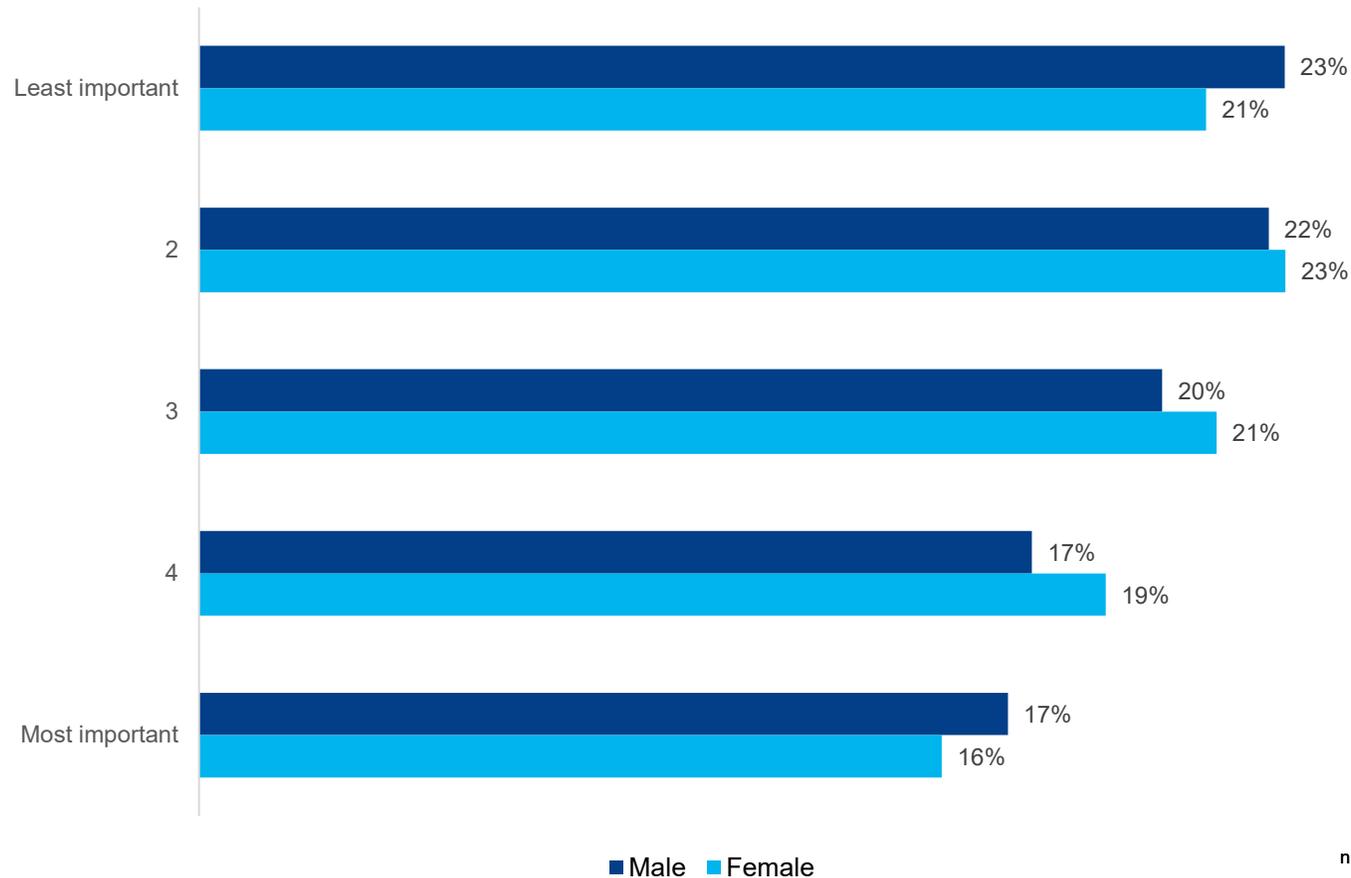


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- Only **15%** of men and **13%** of women rate it as most important (5/5).
- **The largest shares place it at level 2** (**23%** men, **25%** women) or mid-level 3 (**22%** both).
- **About one-fifth deem it least important** (**20%** men, **21%** women).

Medication adherence importance is perceived less important across genders

Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Take medications as prescribed“ from 1 to 5 – 1 being the least important and 5 being the most important.

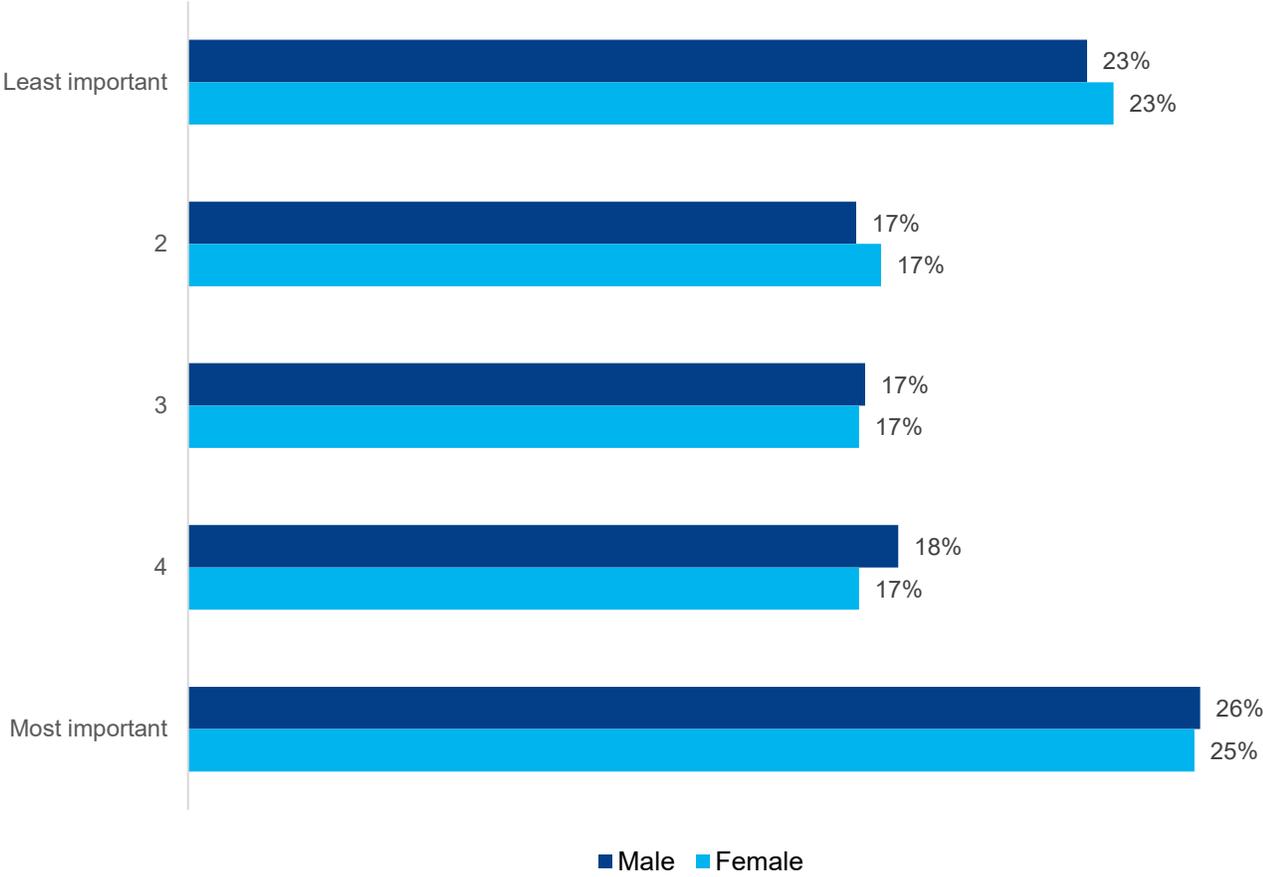


- **17%** of men and **16%** of women rate it as most important (5/5).
- **Over one-fifth place it at mid-level 3** (**20%** men, **21%** women).
- The largest share consider it least important or level 2 (**≈23 %** each).

Partake in healthy lifestyle choices is perceived very differently but is balanced between genders



Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Partake in healthy lifestyle choices“ from 1 to 5 – 1 being the least important and 5 being the most important.

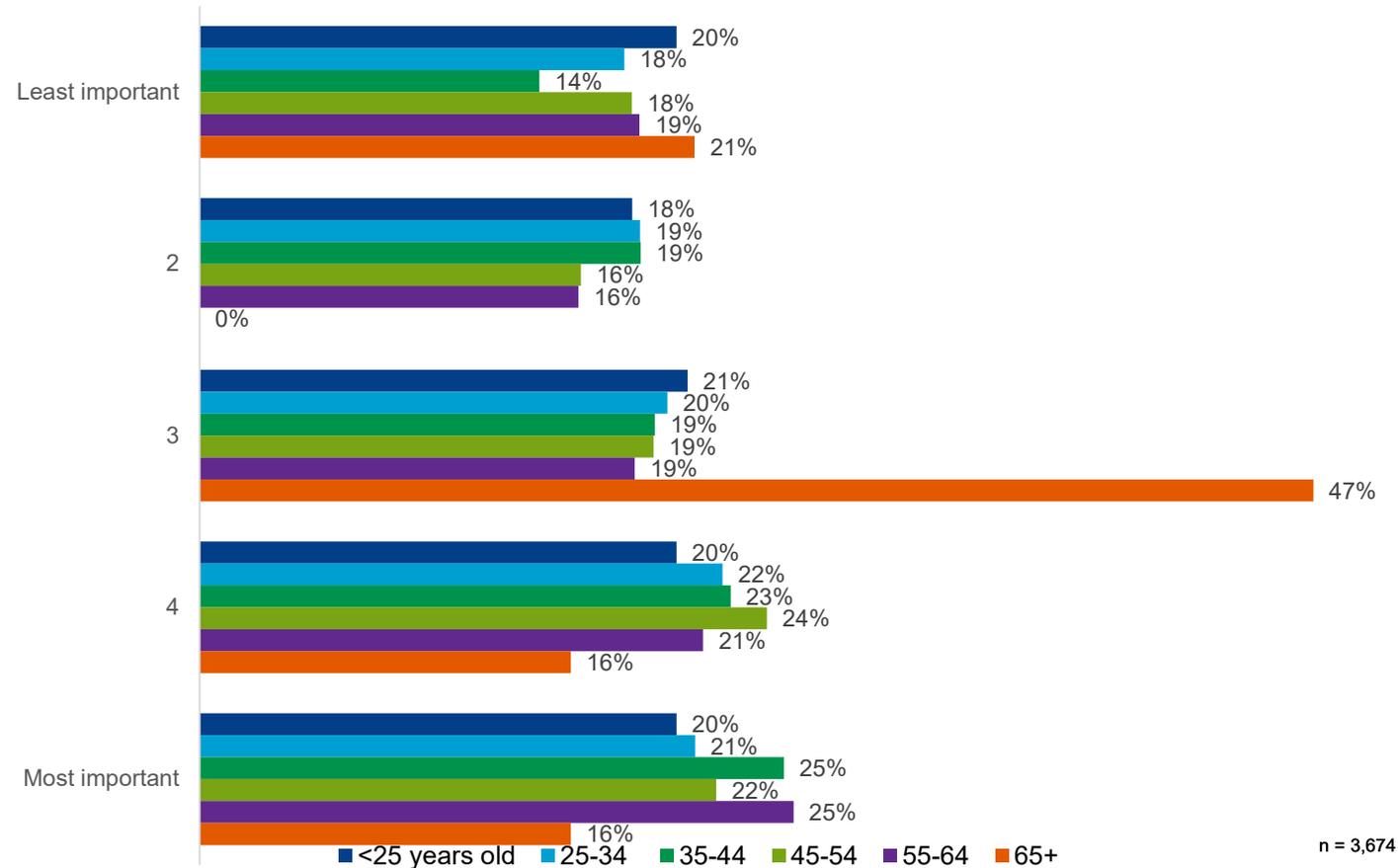


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- **26%** of men and **25%** of women rate lifestyle choices as the single most important factor (5/5).
- Equal shares of men and women (**23%** each) place it at the lowest importance level (1/5).
- **Middle ratings (2–4) are fairly uniform across genders**, each around **17–18 %**.

Identify symptoms early remains a top priority across age groups

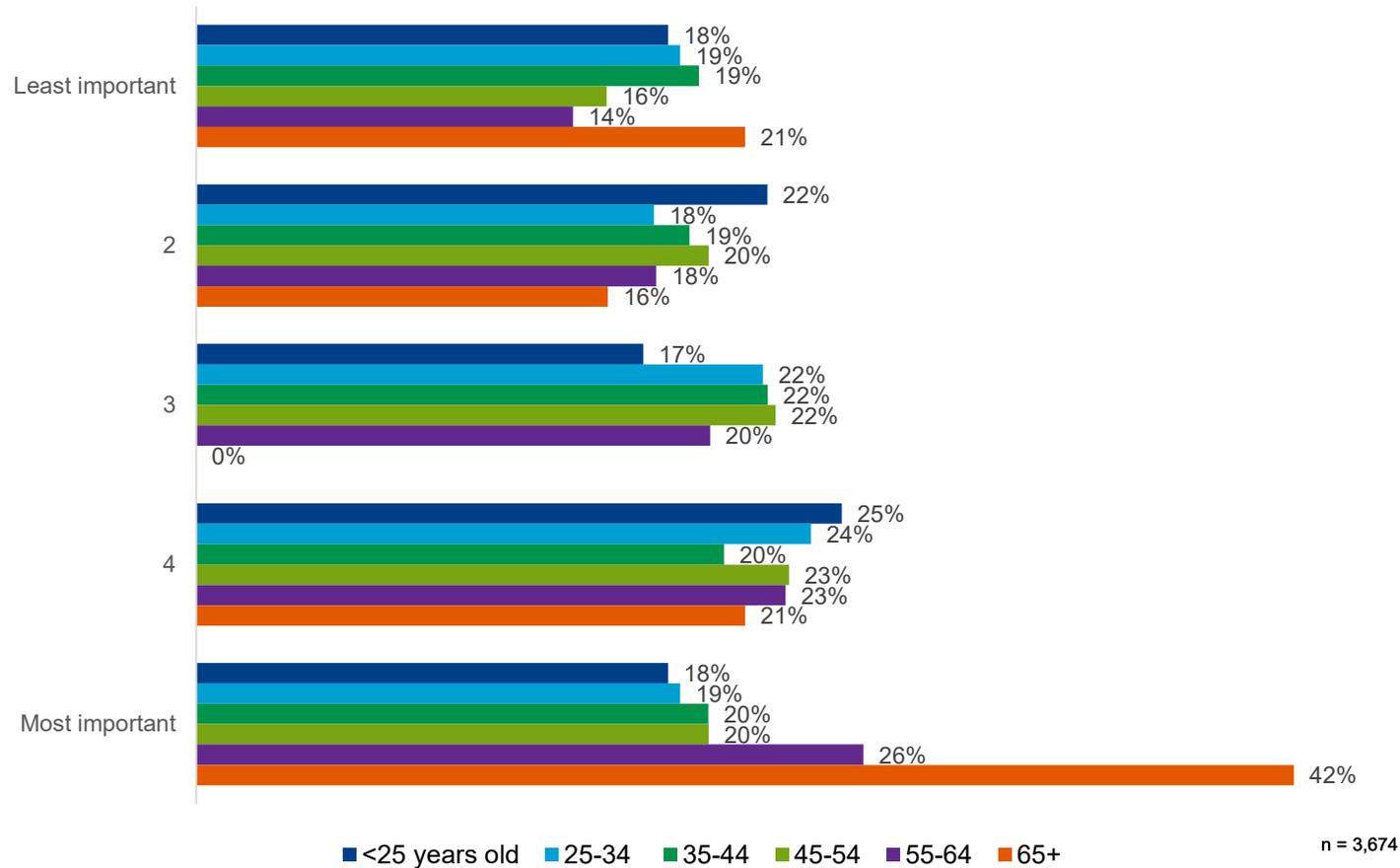
Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Identify symptoms early “ from 1 to 5 – 1 being the least important and 5 being the most important.



- Around **one in five patients in each age bracket** rated early symptom identification as “most important,” peaking at **25%** among 35–44 and 55–64-year-olds.
- The 65+ group shows the greatest ambivalence, with **47%** selecting the neutral “3” rating versus lower “4” (**16%**) or “5” (**20%**).
- **Overall, nearly half of respondents across most ages combined “4” and “5” ratings, underscoring broad support for early detection.**

Seek care promptly is paramount, especially among older patients

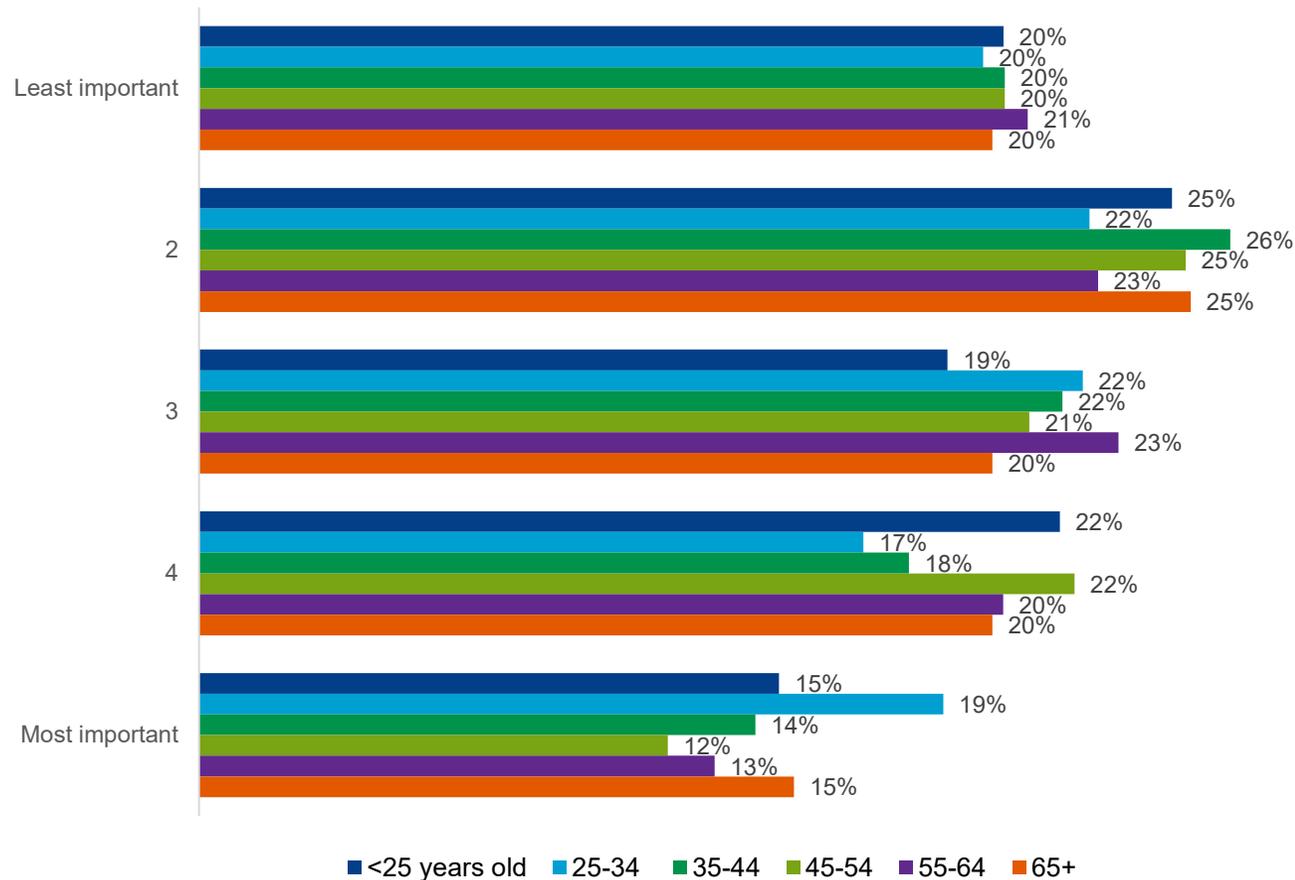
Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Seek care promptly” from 1 to 5 – 1 being the least important and 5 being the most important.



- The 65+ group leads with **42%** rating prompt care as “most important,” **well above younger cohorts (18–20%)**.
- A quarter of under-25s and 25–34s (**25%** and **24%**) also marked it “4,” showing widespread support across ages.
- Combined “4” and “5” ratings exceed **60%** in every age bracket, **underscoring universal recognition of timely care**.

Follow your physician's recommendations rated highly by mid-career adults

Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor "Follow your physician's recommendations" from 1 to 5 – 1 being the least important and 5 being the most important.

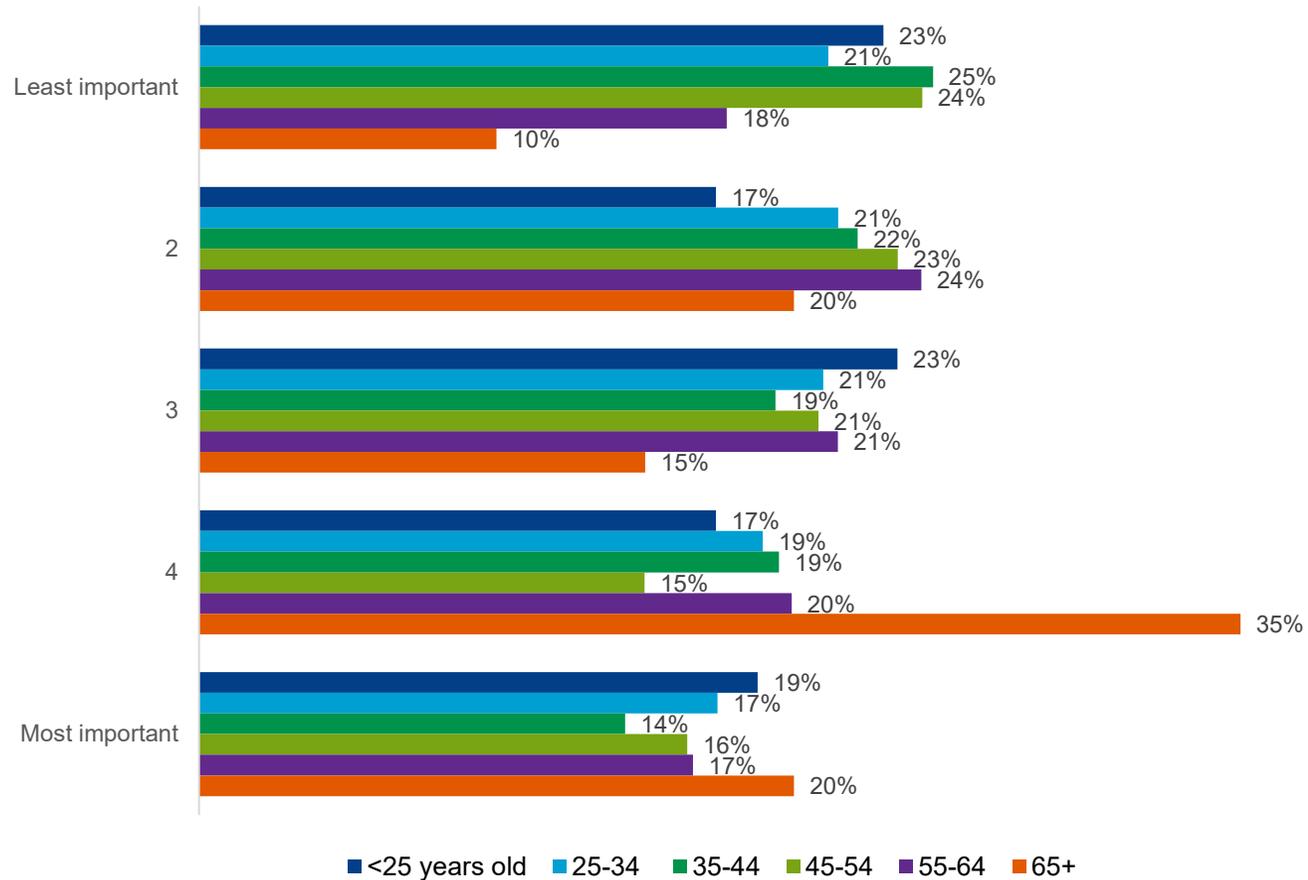


- 25–34-year-olds lead with **19%** marking it “5 – most important,” compared to just **12%** of 45–54-year-olds.
- Strong “4” ratings (next-highest importance) peak at **22%** among both <25 and 55–64 age groups.
- Across all ages, over **one-third** rate **physician guidance as a top-two priority** (combined 4 + 5).

n = 3,674

Take medications as prescribed rated most vital by seniors

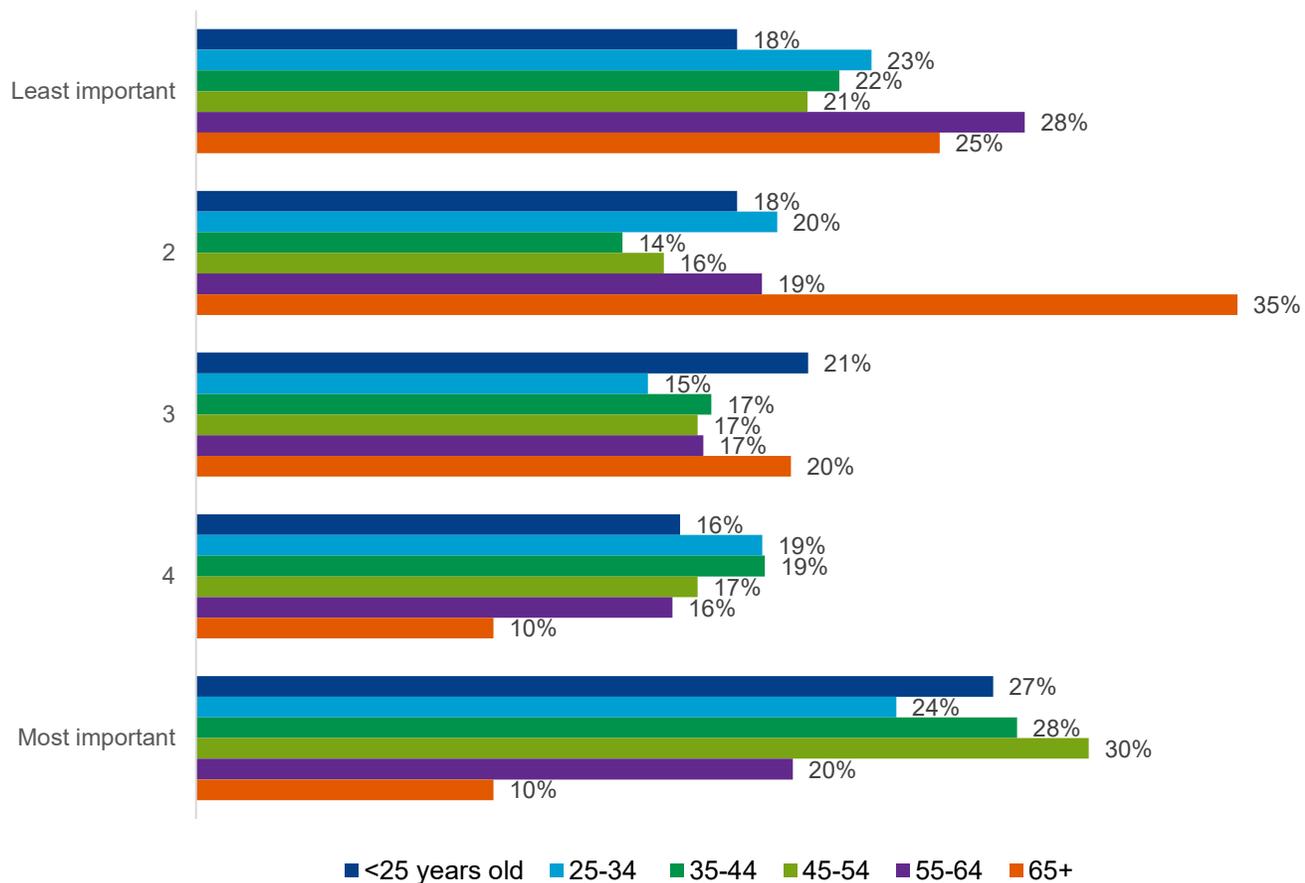
Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Take medications as prescribed“ from 1 to 5 – 1 being the least important and 5 being the most important.



- Among those 65 +, **35%** rank medication adherence as “4” – the highest share across age groups for that rating.
- For “5 – most important,” the under-25 segment leads at **19%**, followed closely by 55–64 at **20%**.
- **Overall, a majority in every age bracket place medication adherence in the top two importance tiers** (combined ratings of 4 and 5).

Partake in healthy lifestyle choices seen as most critical by those middle-aged

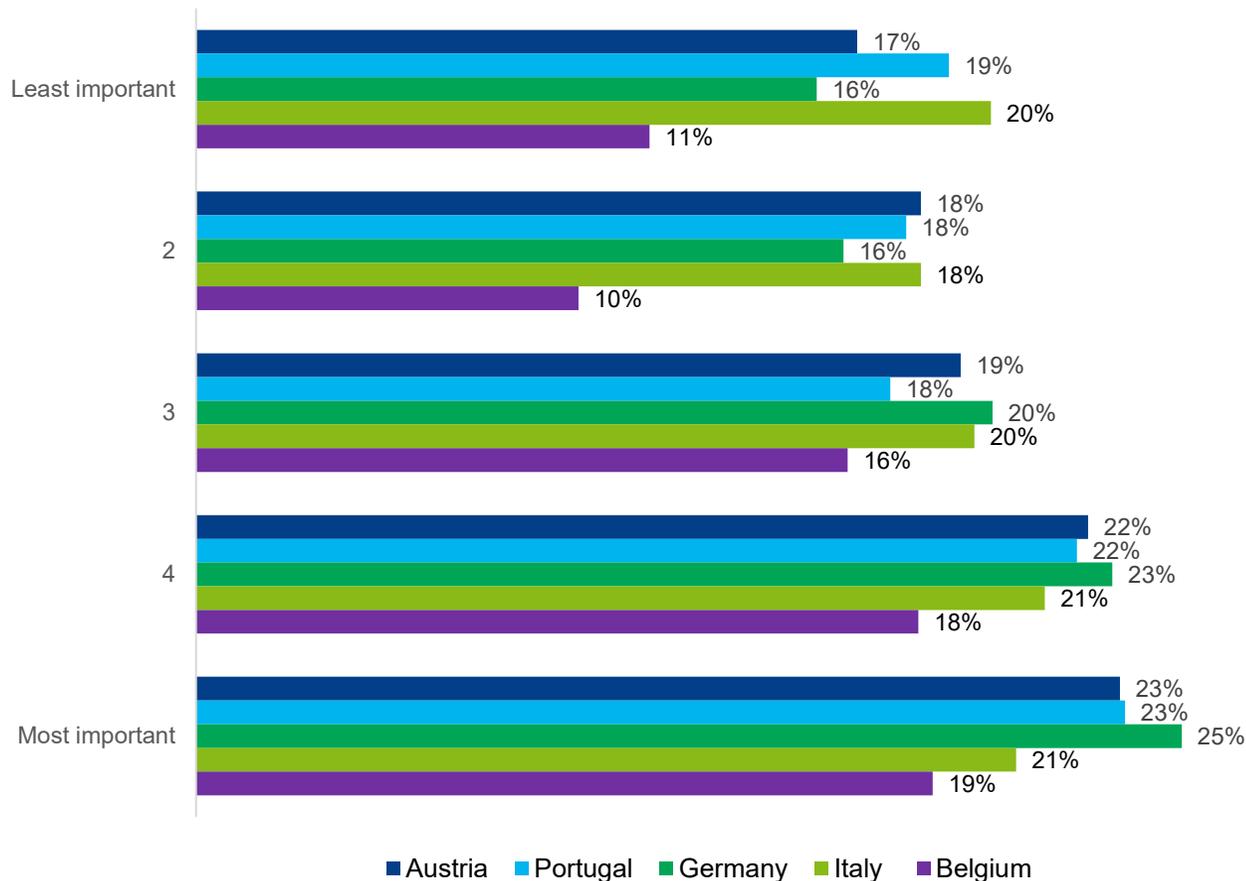
Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Partake in healthy lifestyle choices“ from 1 to 5 – 1 being the least important and 5 being the most important.



- **The 45–54 age group leads with 30%** marking healthy lifestyle choices as “5 – most important,” followed by 35–44 at **28%**.
- Younger adults (<25) also prioritise this, with **27%** rating it most important.
- **Those 65 + are least likely to consider it top-tier**, with only **10%** selecting “5.”

Identify symptoms early seen as most critical by a quarter of respondents

Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Identify symptoms early “ from 1 to 5 – 1 being the least important and 5 being the most important.



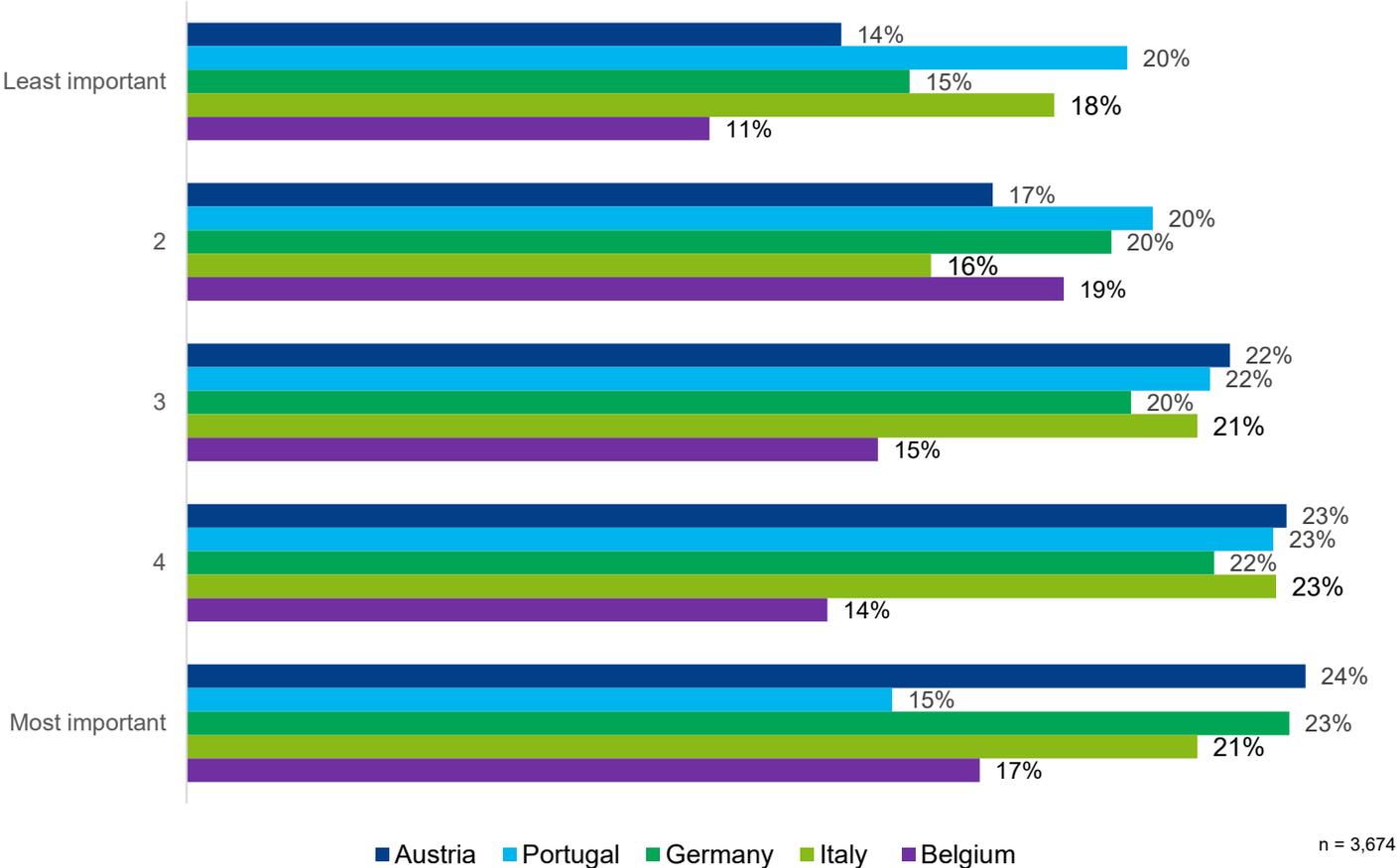
n = 3,674

- **Germany leads with 25%** rating early symptom recognition as “most important”, followed closely by Austria and Portugal (both **23%**).
- Italy (**21%**) and Belgium (**19%**) also place high value on early detection.
- Across all markets, over **80%** rate this factor as a 4 or 5 on importance.

Seek care promptly rated most important by nearly a quarter of respondents



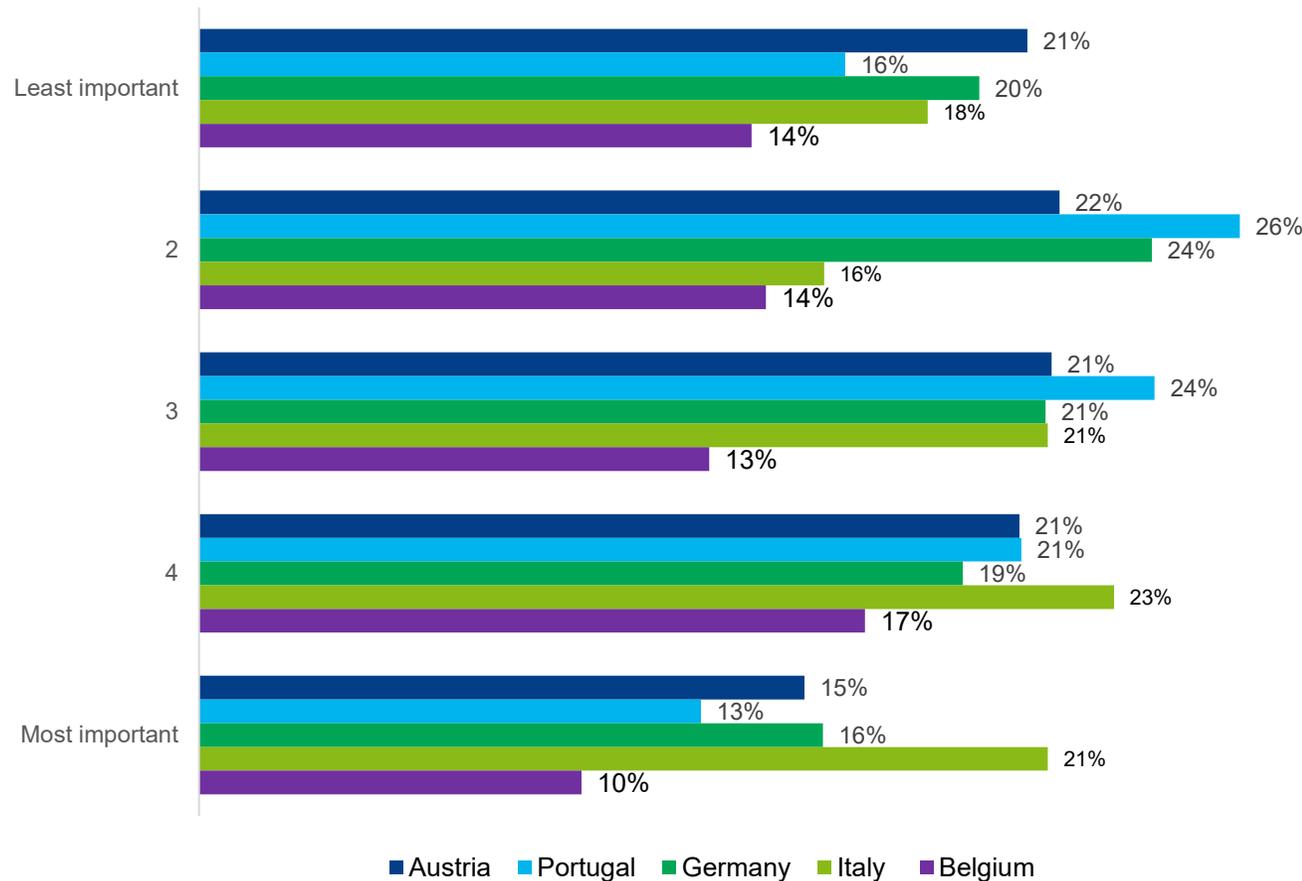
Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Seek care promptly” from 1 to 5 – 1 being the least important and 5 being the most important.



- Austria leads with 24% rating prompt care as “most important”, followed by Germany (23%) and Italy (21%).
- A majority (≥60%) across all markets assign it a score of 4 or 5, underscoring broad recognition of urgent action.
- Belgium shows the lowest “most important” rating at 17% yet still places prompt care above mid-scale.

Follow physician's recommendations seen less often as top priority across markets

Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor "Follow your physician's recommendations" from 1 to 5 – 1 being the least important and 5 being the most important.

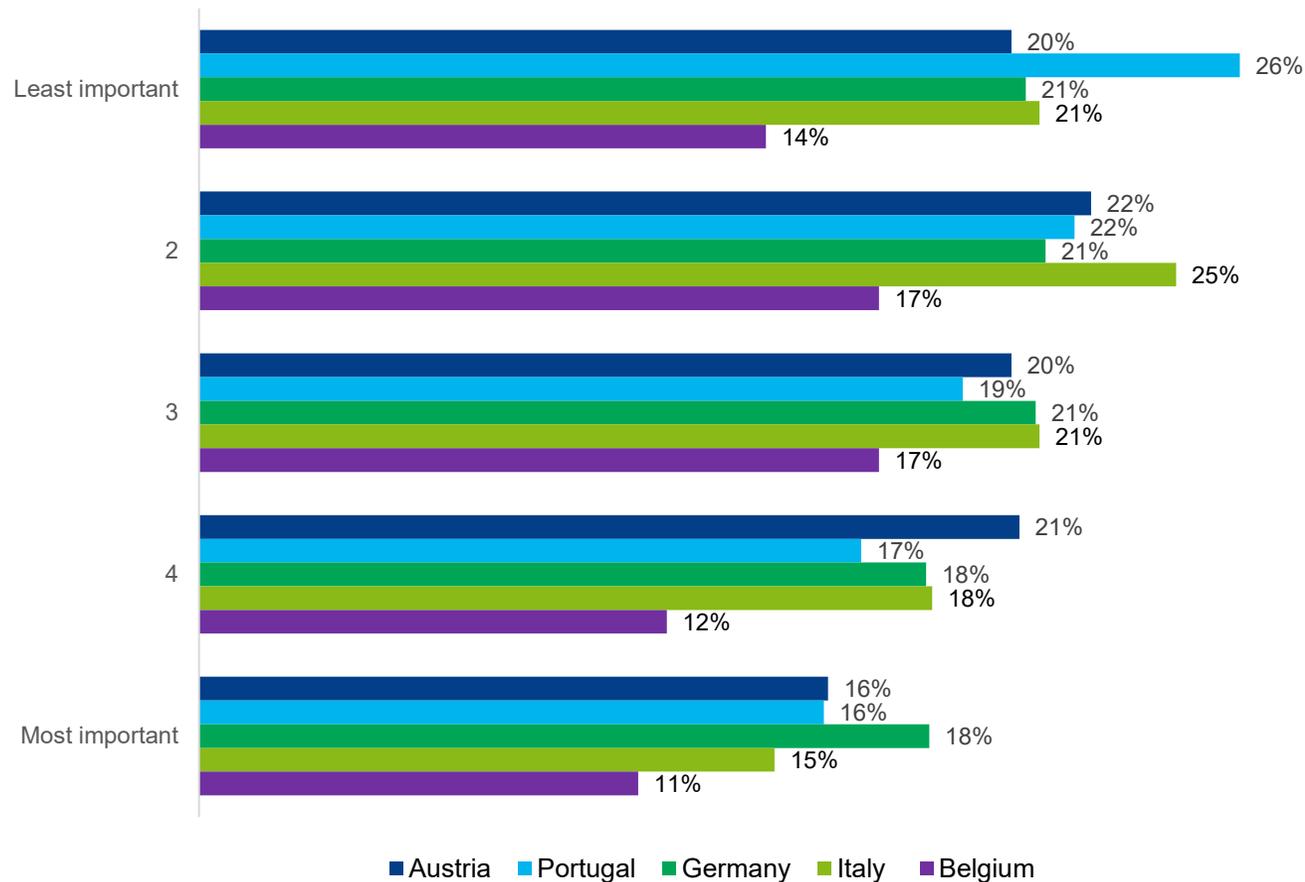


n = 3,674

- Italy leads with **21%** rating this “most important,” followed by Germany (**16%**) and Austria (**15%**).
- Portugal (**13%**) and Belgium (**10%**) place it lowest at the top rating.
- **Across all countries, about 40% (ratings 4+5) acknowledge its importance, indicating moderate consensus.**

Take medications as prescribed seen as moderate priority across markets

Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Take medications as prescribed“ from 1 to 5 – 1 being the least important and 5 being the most important.



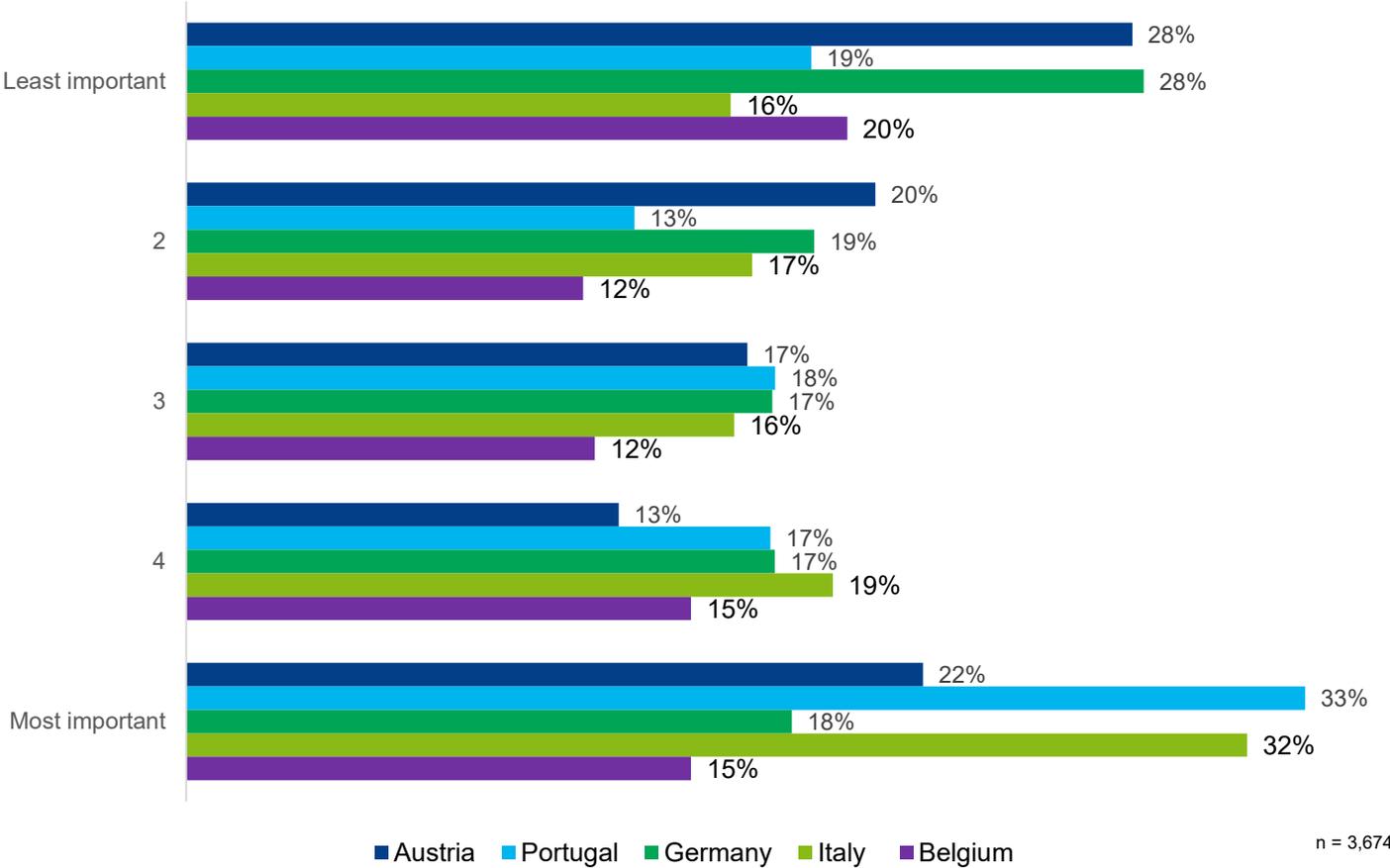
n = 3,674

- Only **16–18%** in Austria, Portugal and Germany rate it “most important,” with Italy lower at **15%** and Belgium at just **11%**.
- Portugal stands out with **26%** calling it “least important,” **suggesting skepticism about medication adherence**.
- Italy (**25%**) most often slots it at level 2, indicating a moderate but not top-tier view of its role.

Partake in healthy lifestyle choices rated top priority in Portugal and Italy



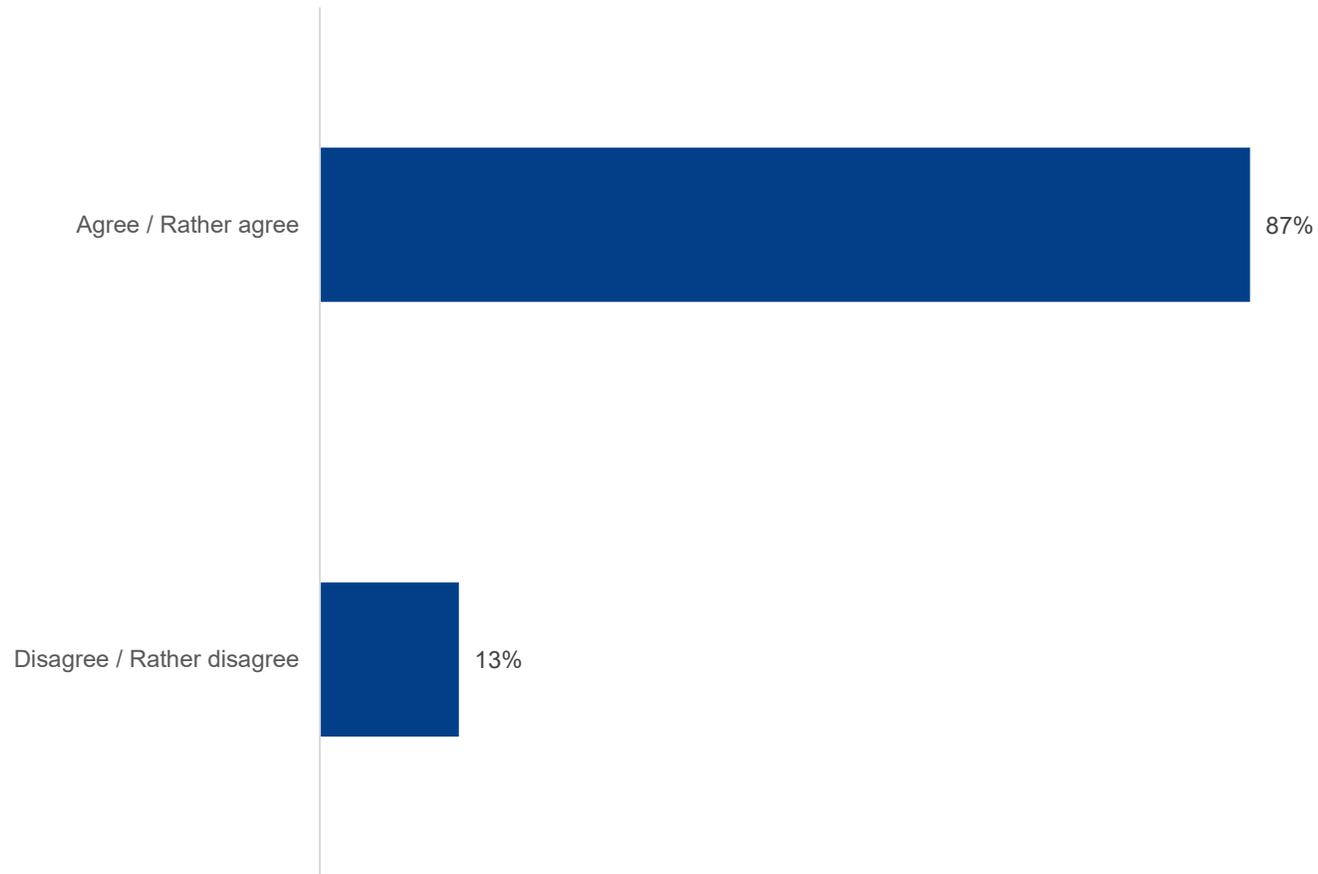
Q18. How important do you think the following factors are for good cardiovascular health? Please rate the factor “Partake in healthy lifestyle choices“ from 1 to 5 – 1 being the least important and 5 being the most important.



- Portugal leads with one-third (33%) and Italy close behind (32%) marking it as most important.
- Austria and Germany both show 28% choosing it as least important, indicating polarised views.
- Middle ratings (levels 2–4) cluster around 13–19 % across markets, reflecting varied perspectives.

1 out of 10 patients do not believe the cardiovascular health information provided by their physician is understandable

Q19. How much do you agree with the following statement: I think my physician or healthcare provider provides me with cardiovascular health information in a manner that is understandable.

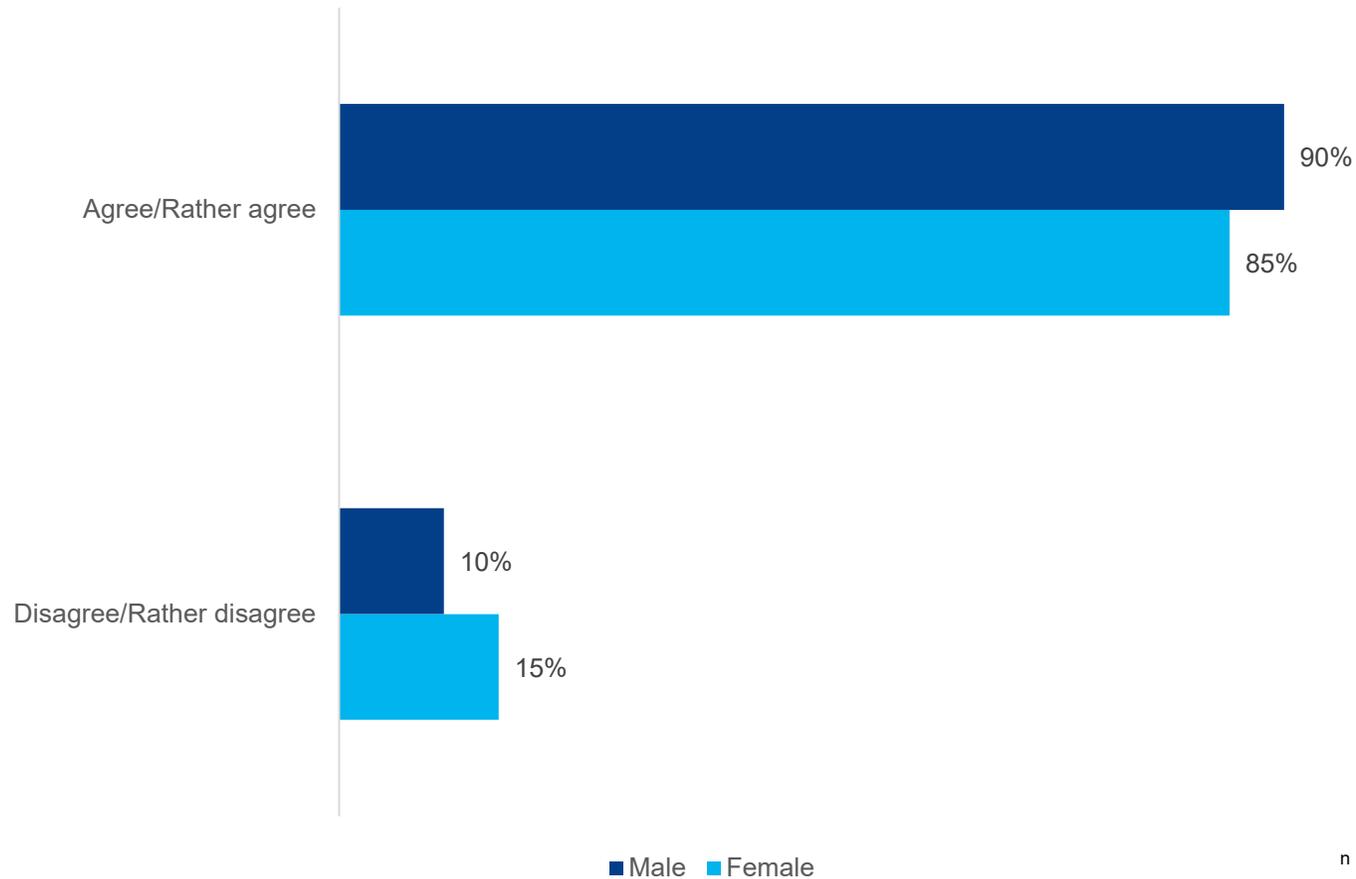


- **87%** of respondents agree or strongly agree that their doctor or healthcare provider explains cardiovascular health information clearly.
- **13%** strongly disagree or disagree.

n = 3,674

Women are more likely to say that the information shared by their physician isn't understandable

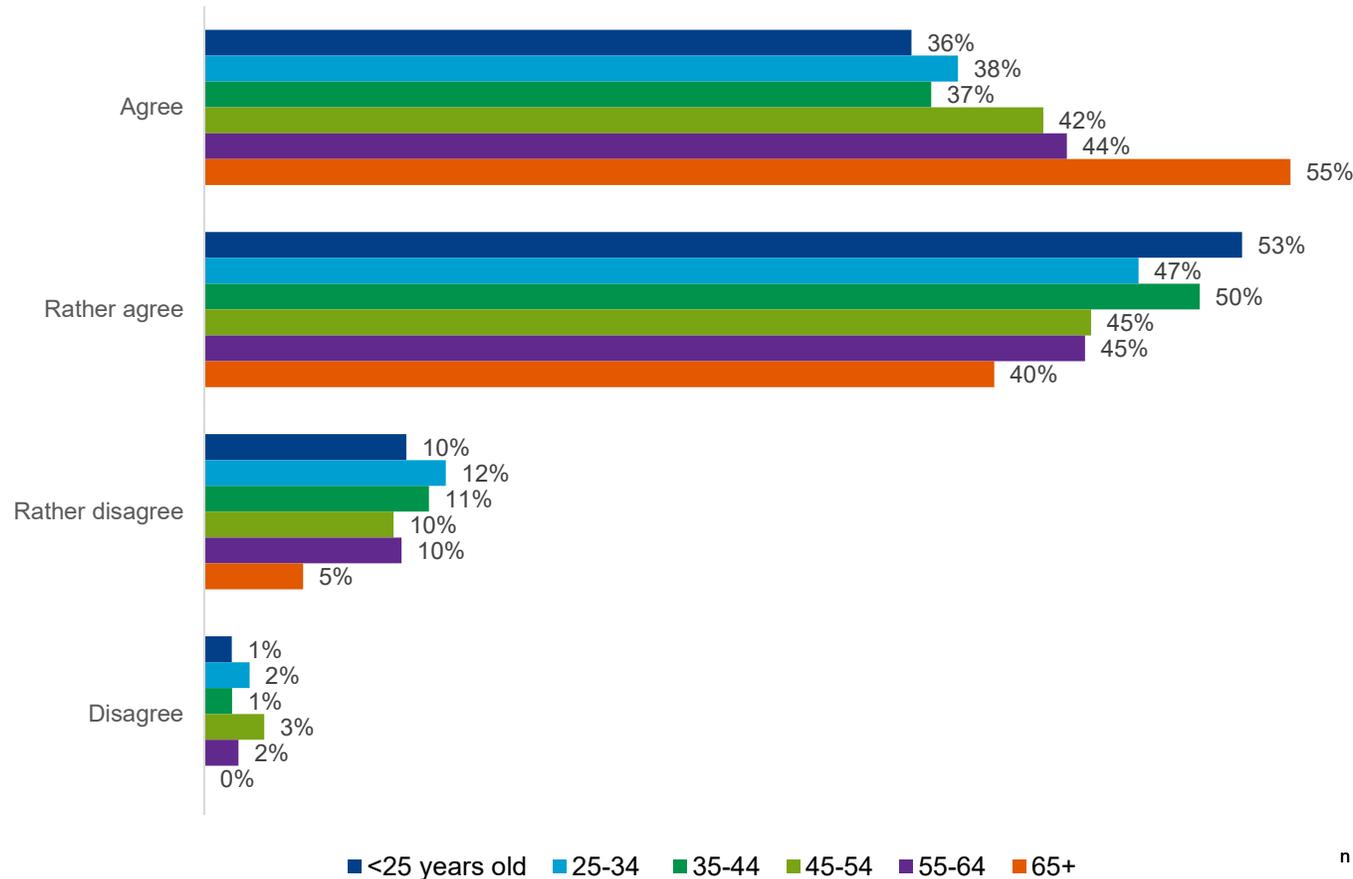
Q19. How much do you agree with the following statement: I think my physician or healthcare provider provides me with cardiovascular health information in a manner that is understandable.



- **90%** of male respondents agree or rather agree that their provider's information is understandable.
- **85%** of female respondents report the same confidence.
- More women (**15%**) than men (**10%**) disagree or rather disagree.

Older patients most likely to find information from physicians clear

Q19. How much do you agree with the following statement: I think my physician or healthcare provider provides me with cardiovascular health information in a manner that is understandable.

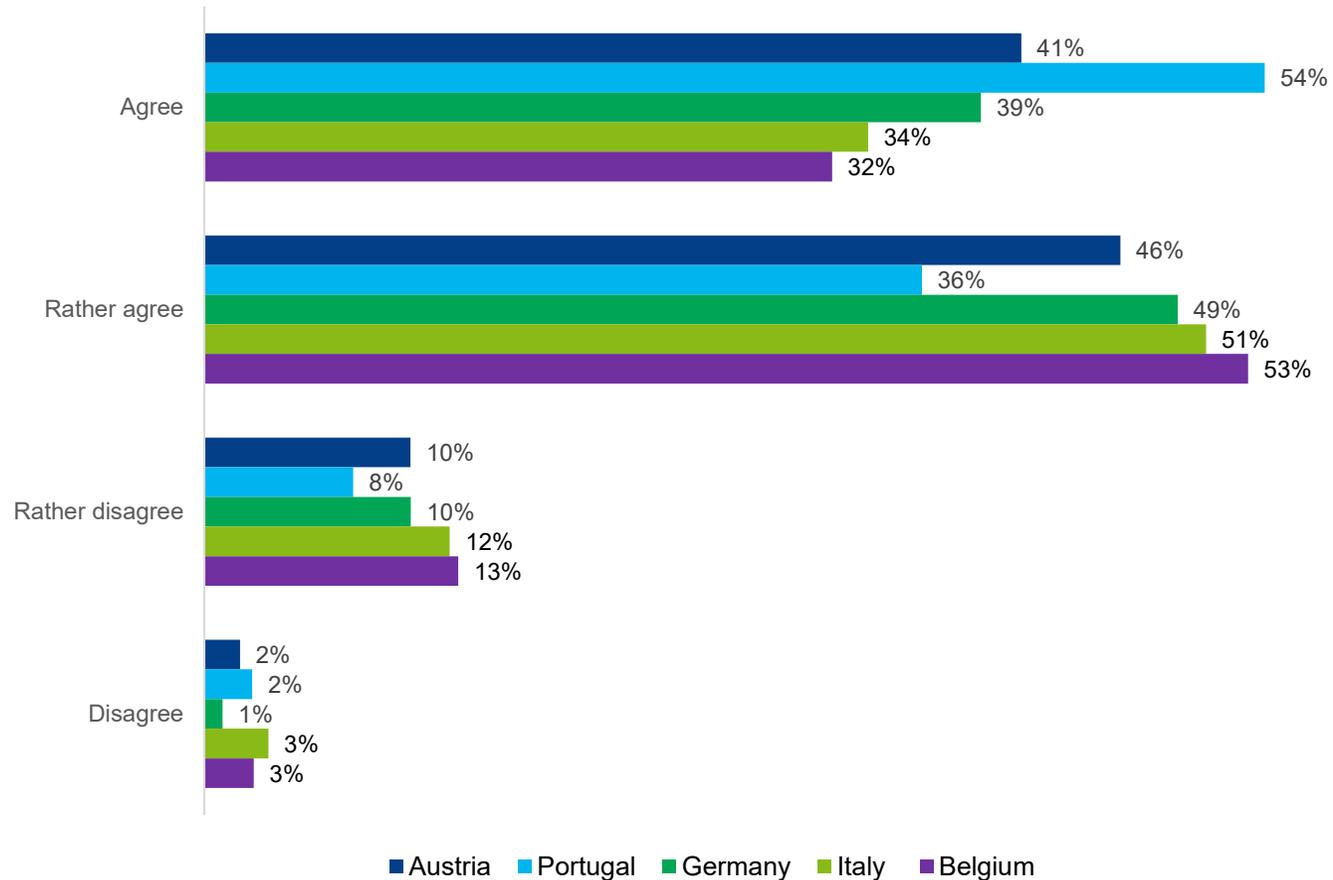


- **65+ leads** with **55%** “agree” that providers explain cardiovascular health understandably.
- **55–64** and **45–54** also high at **44%** and **42%** respectively.
- Younger groups (<25 and 25–34) are more ambivalent, with around half (**53%** and **47%**) choosing “rather agree.”

n = 3,674

Most respondents would feel at least somewhat comfortable disclosing a cardiovascular condition

Q19. How much do you agree with the following statement: I think my physician or healthcare provider provides me with cardiovascular health information in a manner that is understandable.

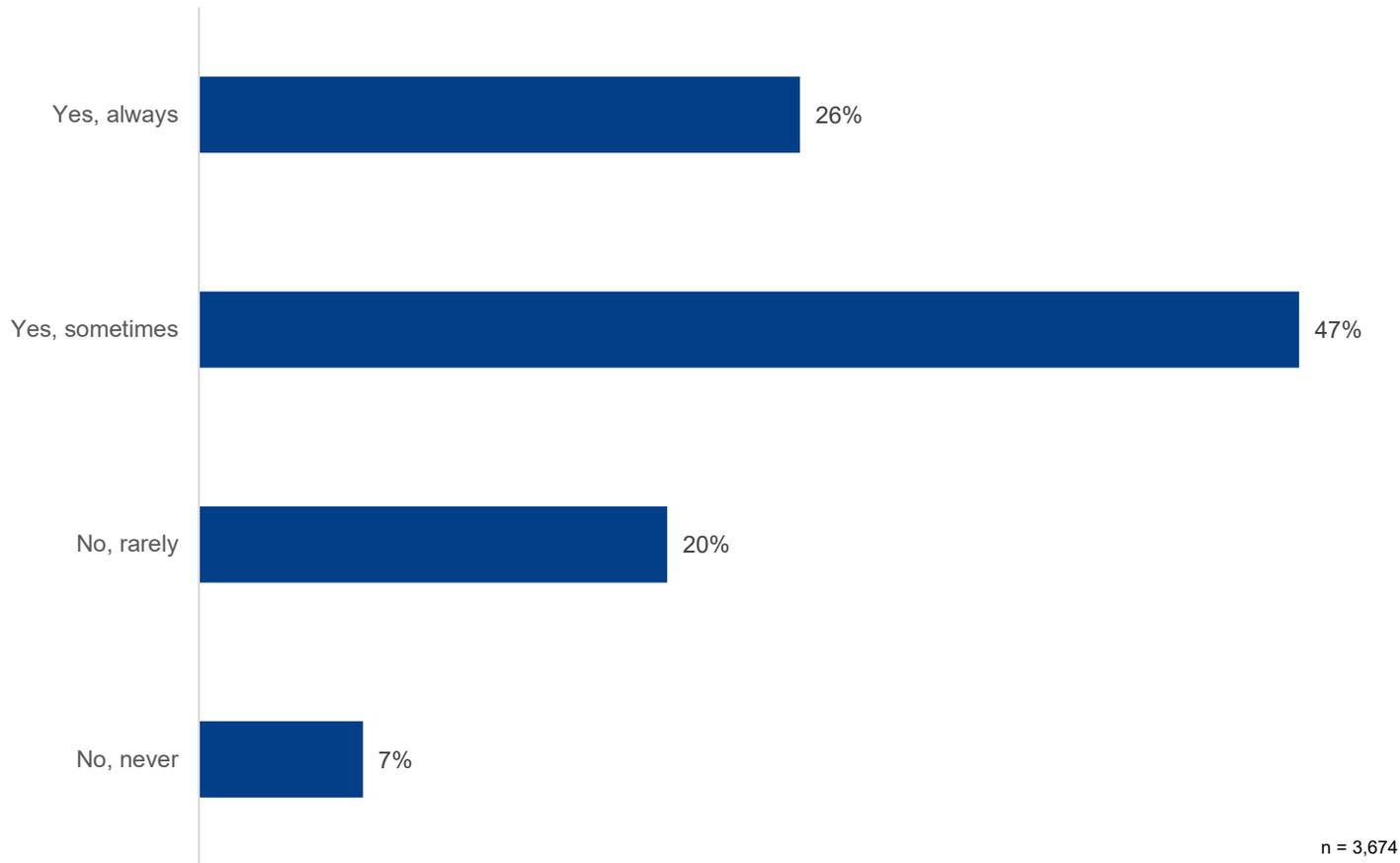


n = 3,674

- In Italy, nearly half (**48%**) say they'd be somewhat comfortable, **the highest across countries.**
- Portugal leads in "very comfortable" responses (**37%**), while **Belgium lags at 14%.**
- Belgium also reports the highest levels of slight discomfort (**38%**) and "not comfortable at all" (**14%**).

1 in 4 patients feel unsupported by their doctor to take an active role in their treatment or cardiovascular health decisions

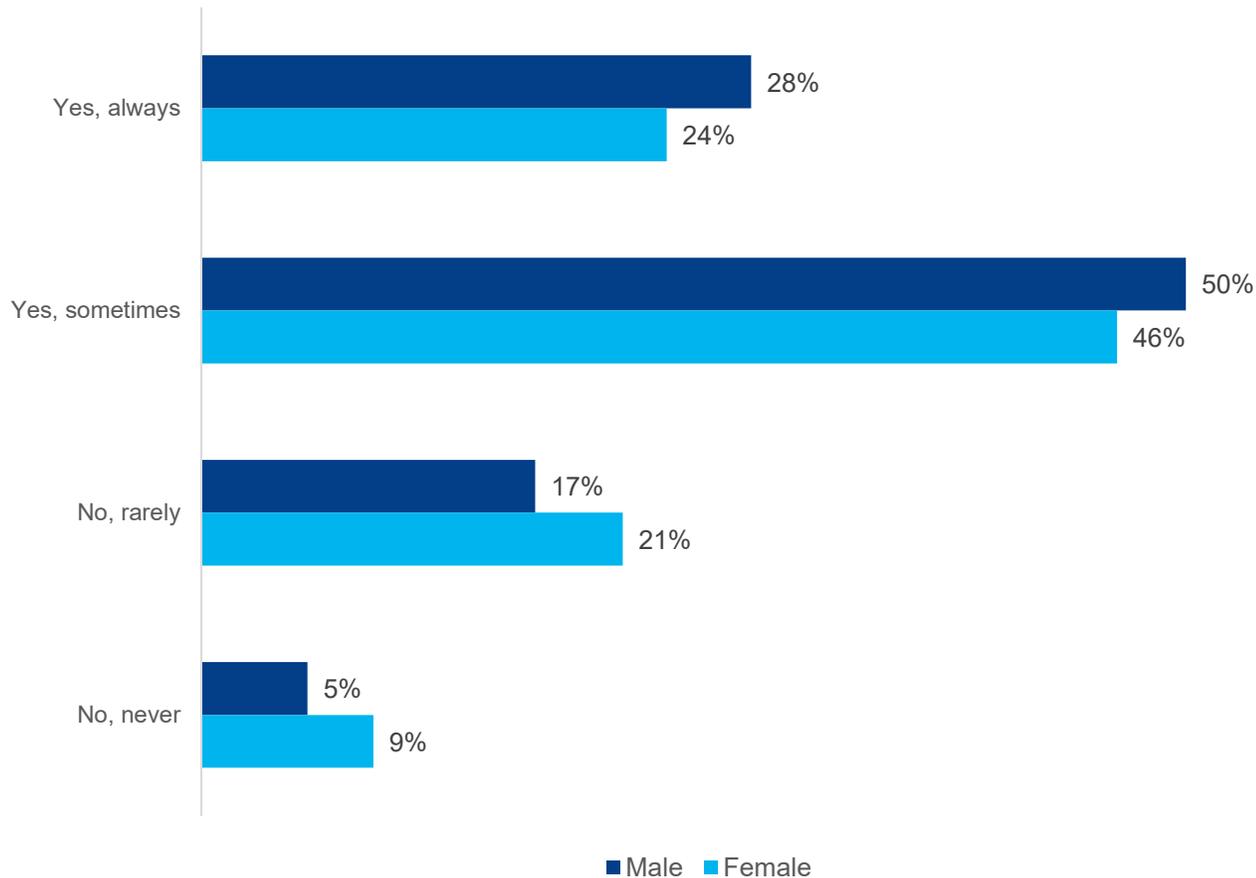
Q20. Does your doctor encourage you to play an active part in making decisions about your cardiovascular health/treatment choice?



- Overall, **73%** of patients experience at least some encouragement to take an active role in making decisions about their cardiovascular health, while **27%** rarely or never feel encouraged.
- **One in four** patients report that their doctor always encourages active participation in cardiovascular care decisions, while about **four in ten** say their doctor sometimes encourages their involvement.
- **20%** say their doctor rarely encourages their participation, and **7%** say their doctor never does.

Male patients experience more participation, while women report more gaps in shared decision-making about cardiovascular health

Q20. Does your doctor encourage you to play an active part in making decisions about your cardiovascular health/treatment choice?

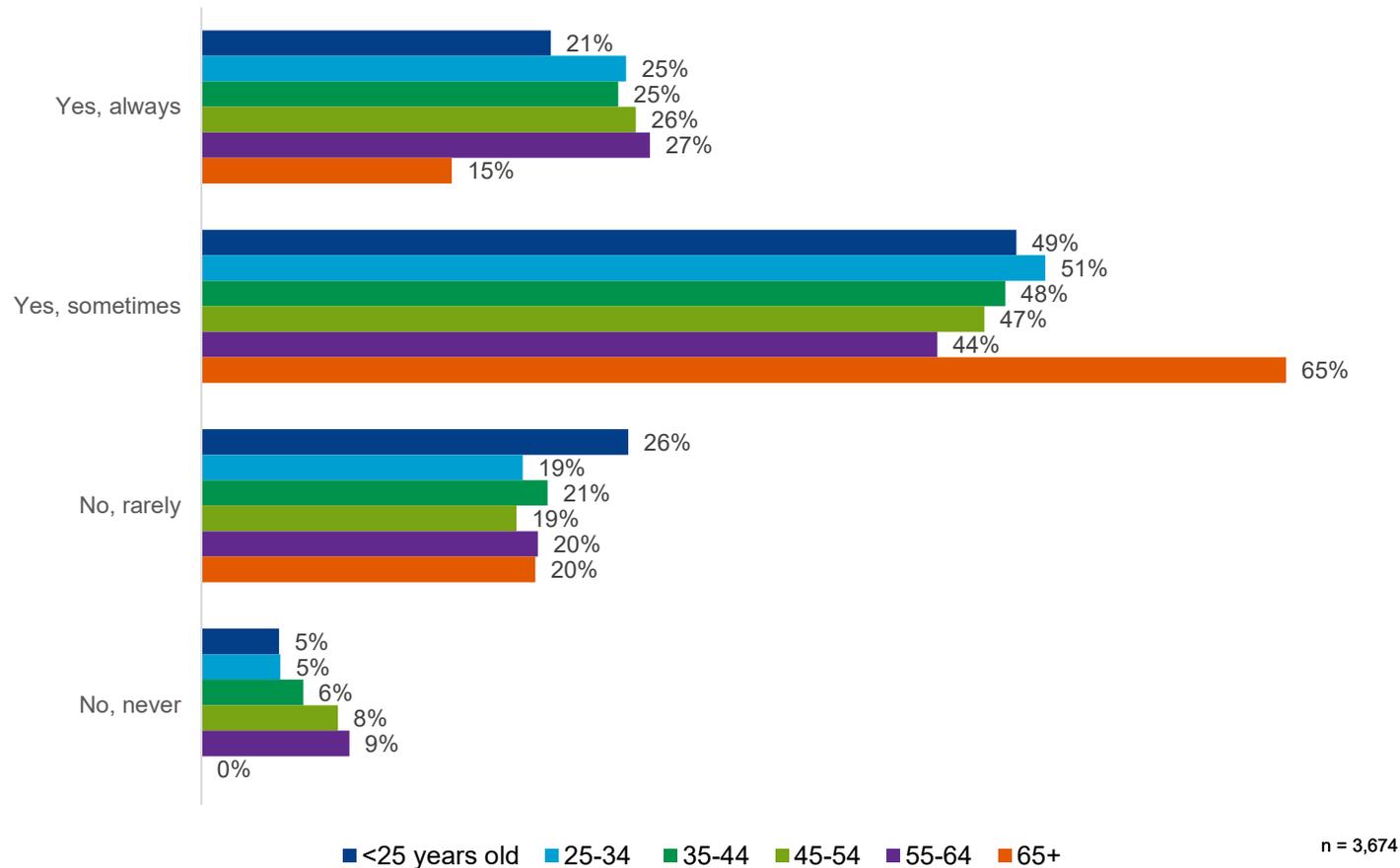


n = 3,674

- **Among male patients, 28%** say they are always encouraged by their doctor to participate in decisions, while **50%** say they are sometimes encouraged.
- **Among female patients, 24%** say they are always encouraged and **46%** say they are sometimes encouraged.
- **Nearly one-fifth of male patients (17%)** say they are rarely encouraged and only **5%** say they are never encouraged, while **21% of female patients say they are rarely encouraged** and **9%** say they are never encouraged.

Doctors regularly invite shared decision-making, especially for older adults

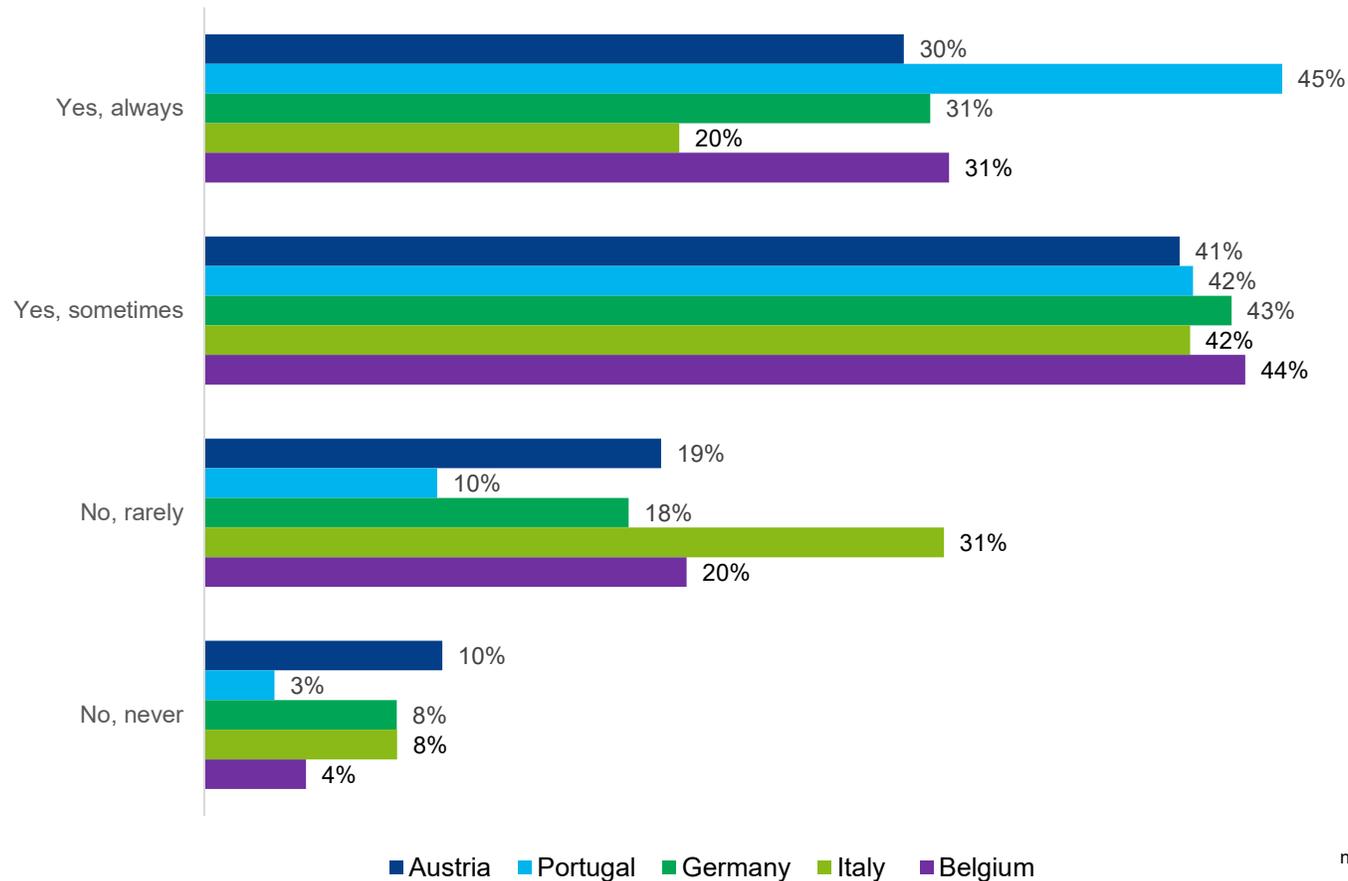
Q20. Does your doctor encourage you to play an active part in making decisions about your cardiovascular health/treatment choice?



- Across all ages, “sometimes” is the dominant response, with 65+ highest at 65%, and younger groups around 49–51%.
- Fewer patients report being “always” encouraged, particularly the 65+ (15%) compared to ~25% in most other age bands.
- A minority (5–9%) say they are never encouraged to play an active role.

Half of patients feel doctors sometimes involve them

Q20. Does your doctor encourage you to play an active part in making decisions about your cardiovascular health/treatment choice?

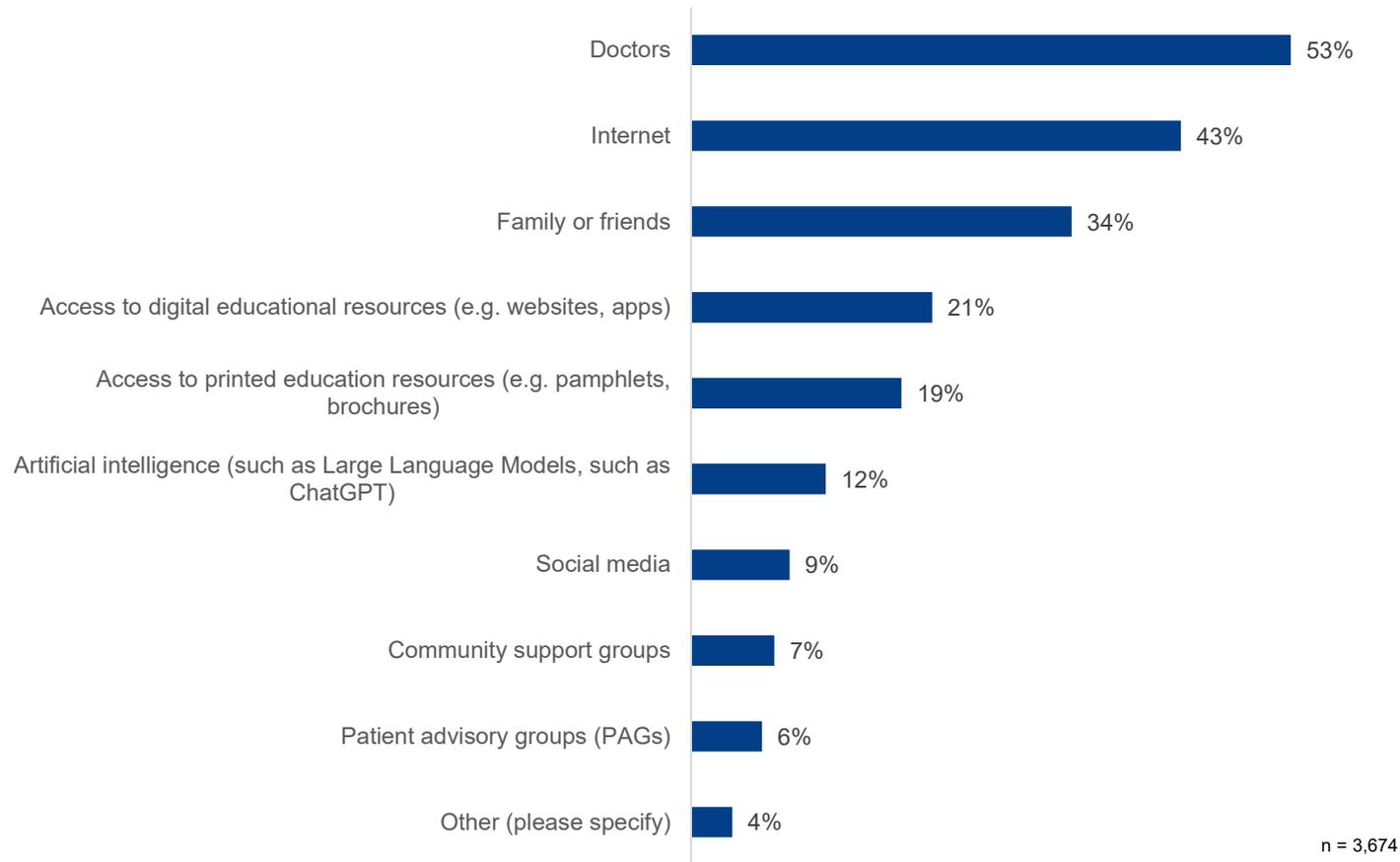


n = 3,674

- In Portugal, **45%** report “yes, always,” compared with just **20%** in Italy.
- **Across all countries combined, 83%** say their doctor “always” or “sometimes” encourages their active involvement.
- **Italy shows the highest rate of rare or never encouragement (31% “rarely” + 8% “never”)**

Most patients access cardiovascular health information through their doctors and the internet

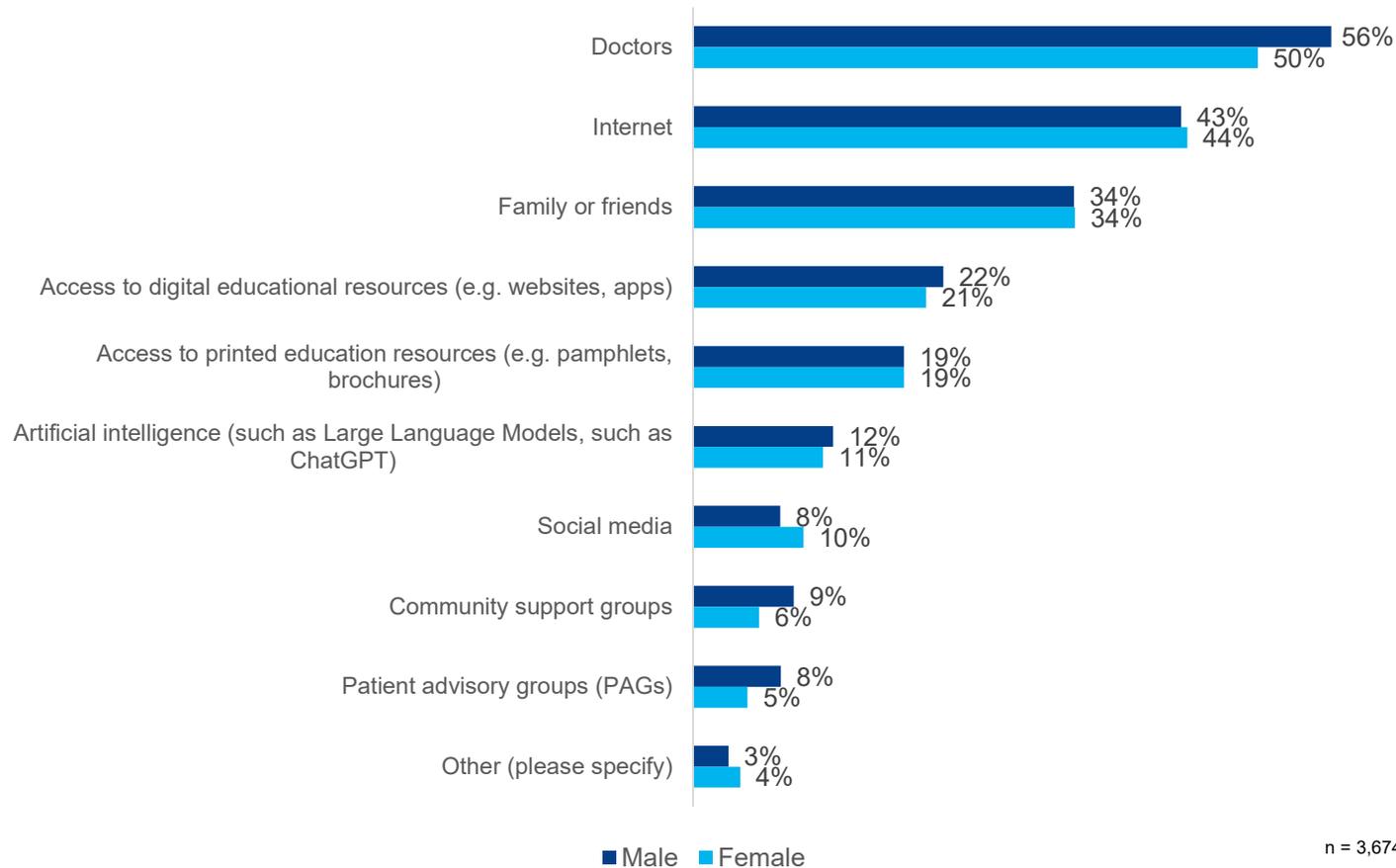
Q21. Have you accessed any additional information or support on how to care for your cardiovascular health?



- **Half of patients** say they receive information about their cardiovascular health from their doctors, while **43%** access information via the internet. Family and friends come next at **34%**.
- About **one in five** reference digital and printed educational materials for additional information or support about their cardiovascular health.
- Artificial intelligence tools (**12%**), social media (**9%**), community support groups (**7%**) and patient advisory groups (**6%**) are used much less by patients.

Doctors remain the primary source for additional cardiovascular support for both genders

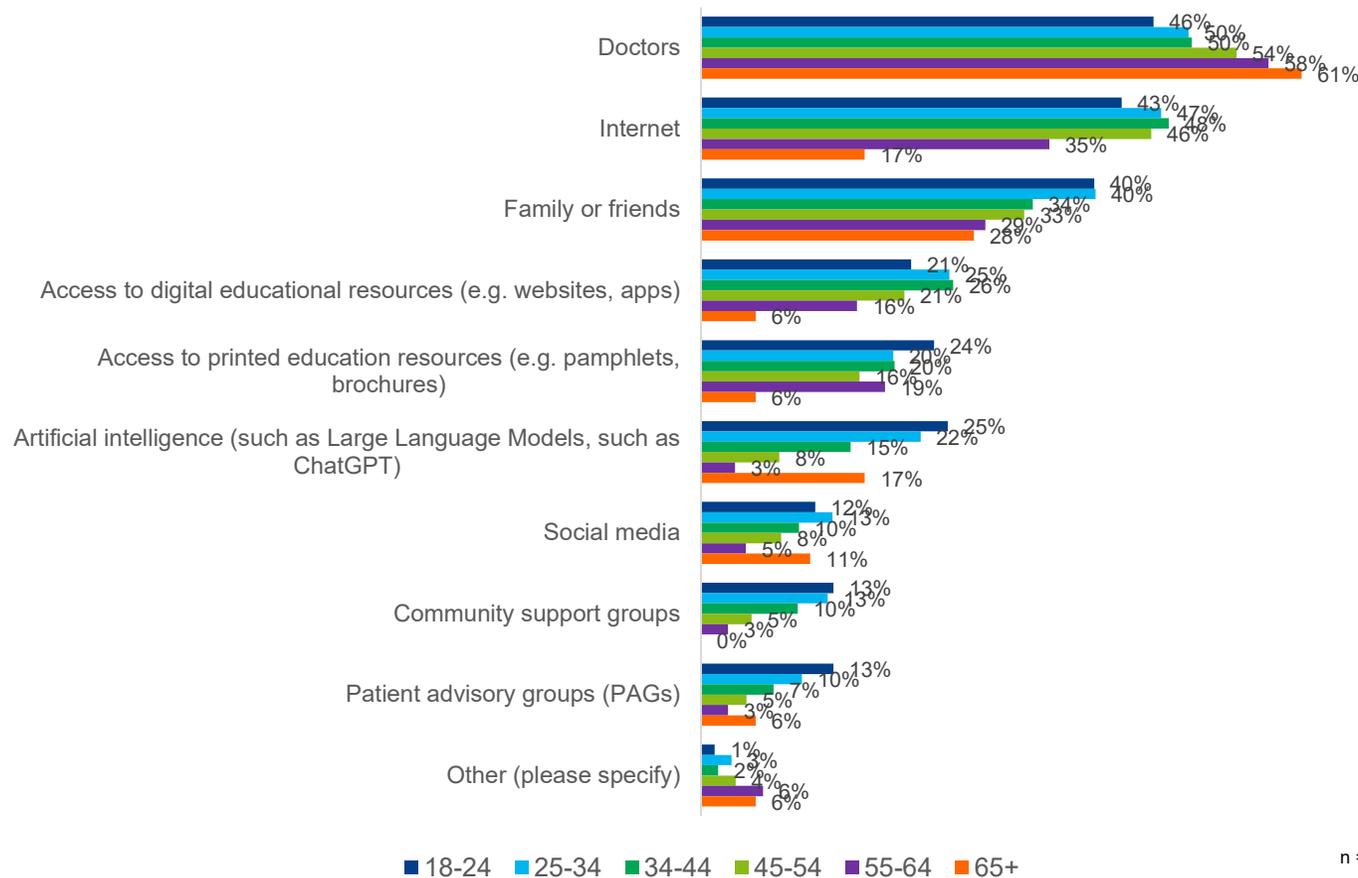
Q21. Have you accessed any additional information or support on how to care for your cardiovascular health?



- **56%** of men and **50%** of women have turned to their doctors for extra information.
- Online resources are **almost equally** used by men (**43%**) and women (**44%**).
- Family and friends rank third, with **34%** for both genders.

Older generations are more likely than average to have access to information about cardiovascular health through their doctors

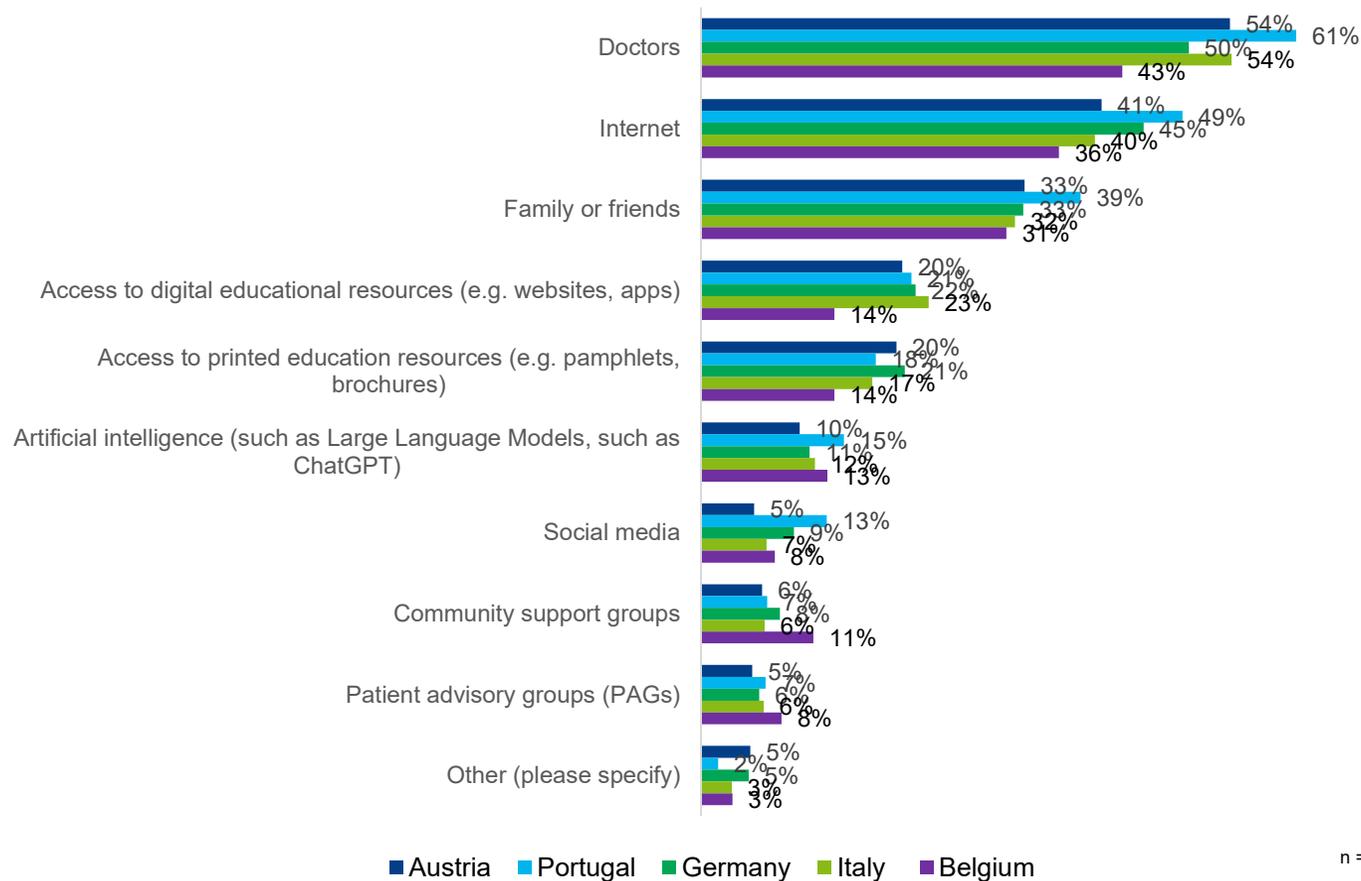
Q21. Have you accessed any additional information or support on how to care for your cardiovascular health?



- The doctor is the top source of access to this information for all generations.
- When comparing age groups, it is noticeable that older patients over the age of 55 are more likely to receive access to cardiovascular health information from their doctor.
- Patients under 35 years of age obtain this access above average through family and friends.
- One in four patients under 25 years of age obtained access to this information through artificial intelligence. Surprisingly, this also applies to 17% of patients in the oldest generation (65+).

Most people turn to their doctors for extra support, with online sources next and AI tools used sparingly

Q21. Have you accessed any additional information or support on how to care for your cardiovascular health?



- Across all markets, doctors are the leading source of additional cardiovascular support (43% in Belgium to 61% in Portugal).
- The internet is the second-most accessed resource (39% in Germany to 49% in Italy), followed by family and friends (31%–39%).
- Use of AI tools like ChatGPT remains low (10%–13%), and community or patient-advisory groups are even less common (5%–11%).

Almost half of patients are open to use artificial intelligence solutions for additional support to manage cardiovascular health

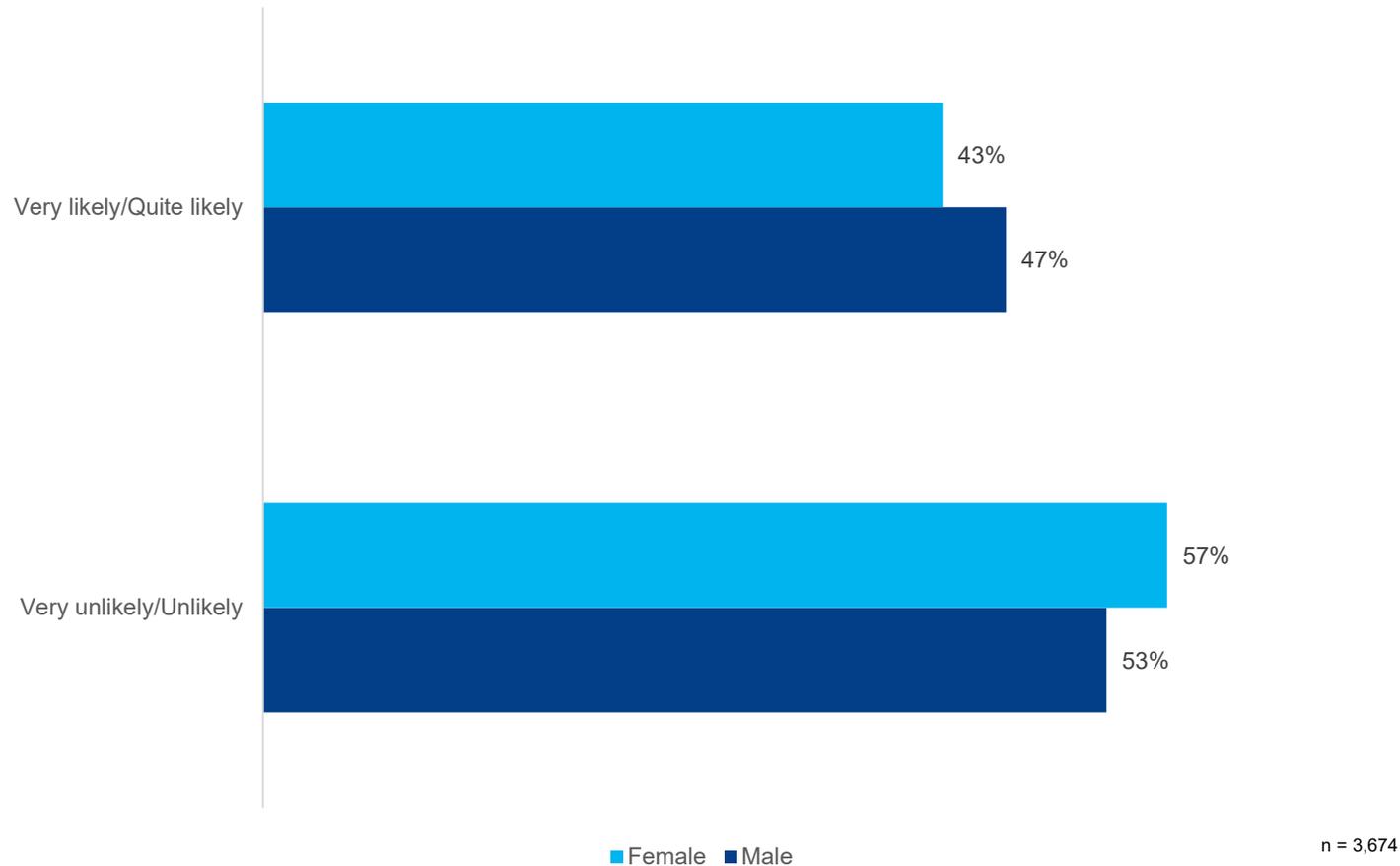
Q22. How likely are you to use artificial intelligence, such as AI-powered virtual assistants or chatbots, for additional support to manage your cardiovascular health?



- Nearly half (**46%**) indicate they are **very likely or quite likely** to adopt these AI-based tools.
- A slight majority (**54%**) are **very unlikely or unlikely** to use AI-powered assistants or chatbots for cardiovascular health management.

Both female and male patients tend to be reluctant to use AI for cardiovascular support

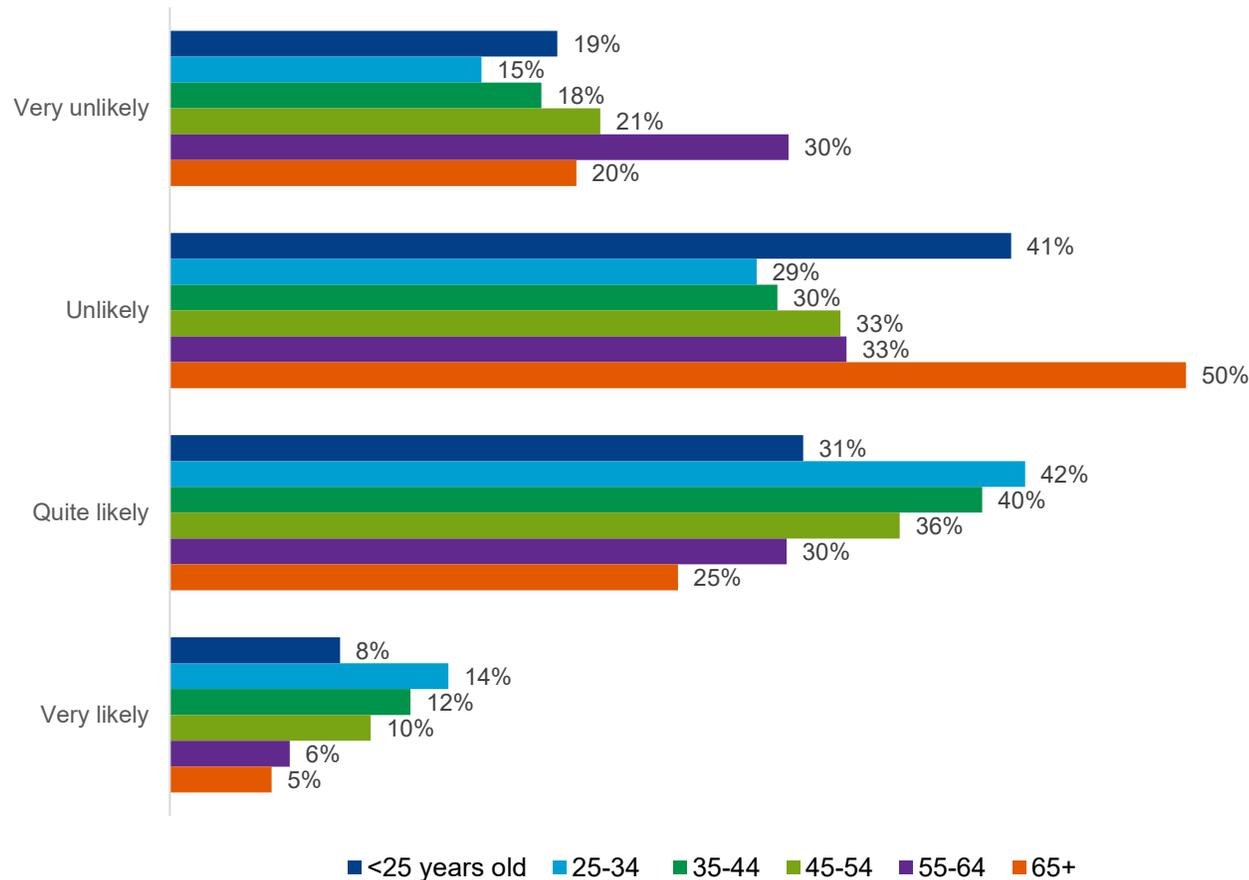
Q22. How likely are you to use artificial intelligence, such as AI-powered virtual assistants or chatbots, for additional support to manage your cardiovascular health?



- While the difference between male and female patients is not large, **men seem to be slightly more open to using AI for cardiovascular support.**

AI adoption skews toward younger adults but is still limited

Q22. How likely are you to use artificial intelligence, such as AI-powered virtual assistants or chatbots, for additional support to manage your cardiovascular health?

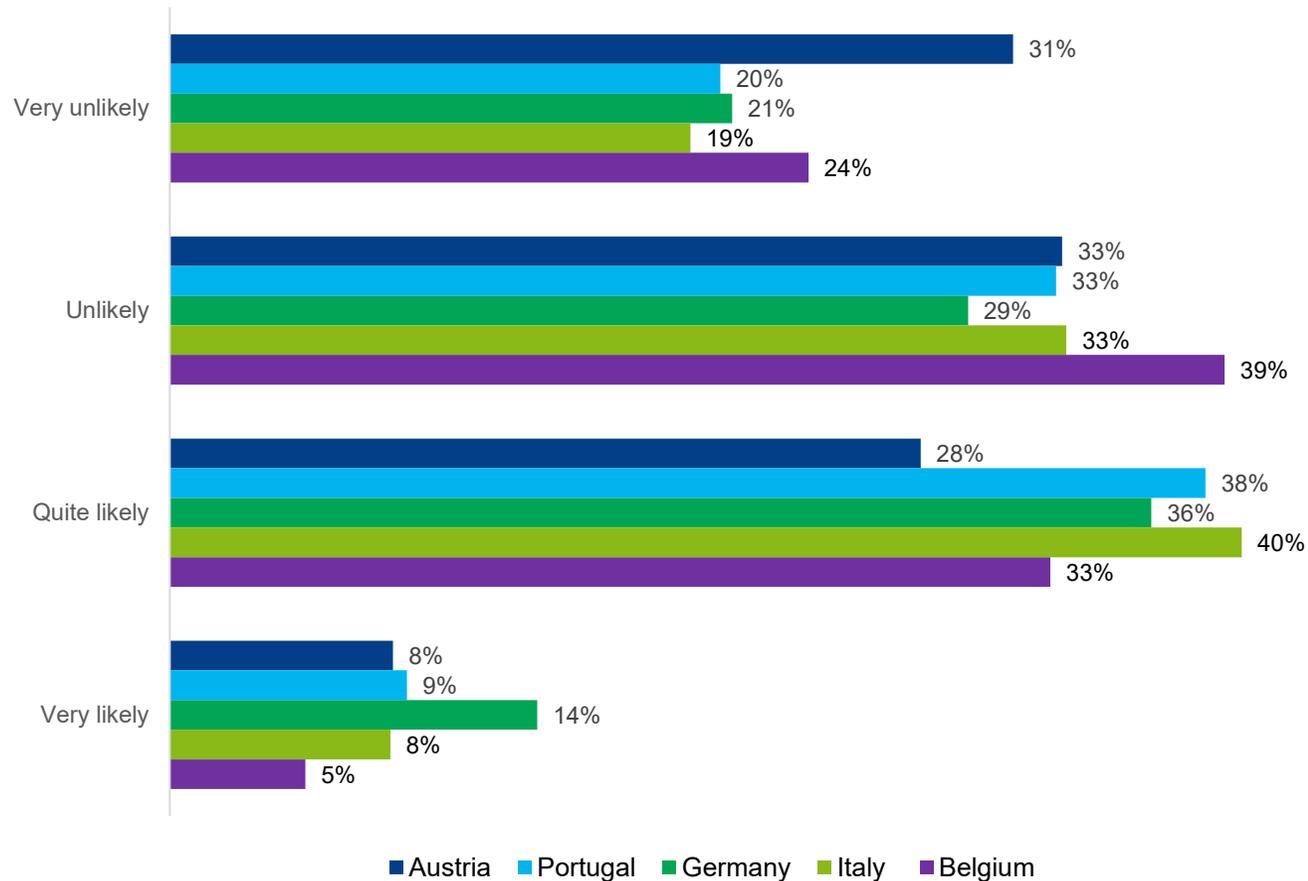


n = 3,674

- **Patients aged 25–34 are the most open to using AI**, with **42%** saying they’re quite likely and **14%** very likely to try it.
- In contrast, **the 65+ group shows the greatest reluctance: 50%** unlikely and only **5%** very likely to adopt AI support.
- Across all ages, truly enthusiastic (“very likely”) users remain a small minority (**5–14%**).

Most Italians and Germans are open to AI support, Austrians are more hesitant

Q22. How likely are you to use artificial intelligence, such as AI-powered virtual assistants or chatbots, for additional support to manage your cardiovascular health?

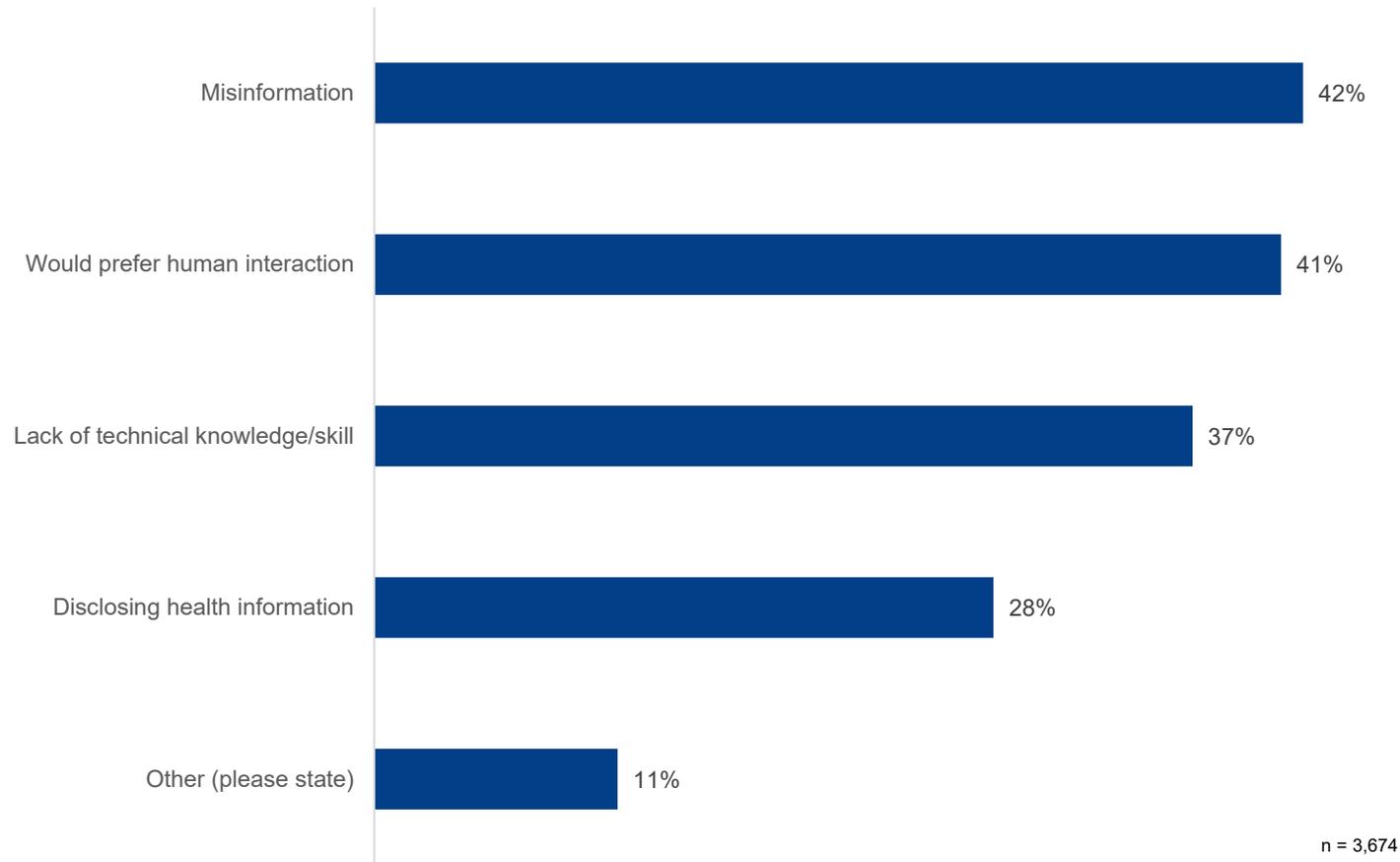


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- **Italy (40%) and Germany (36%) lead in “quite likely” to use AI for heart health, with Belgium close behind (33%).**
- **Austria shows the highest “very unlikely” rate (31%), indicating greater reluctance among its population.**
- **Across all countries, only a small minority (5%–14%) say they’re “very likely” to adopt AI for cardiovascular support.**

The biggest barriers to patients using AI are misinformation and a preference for human interaction

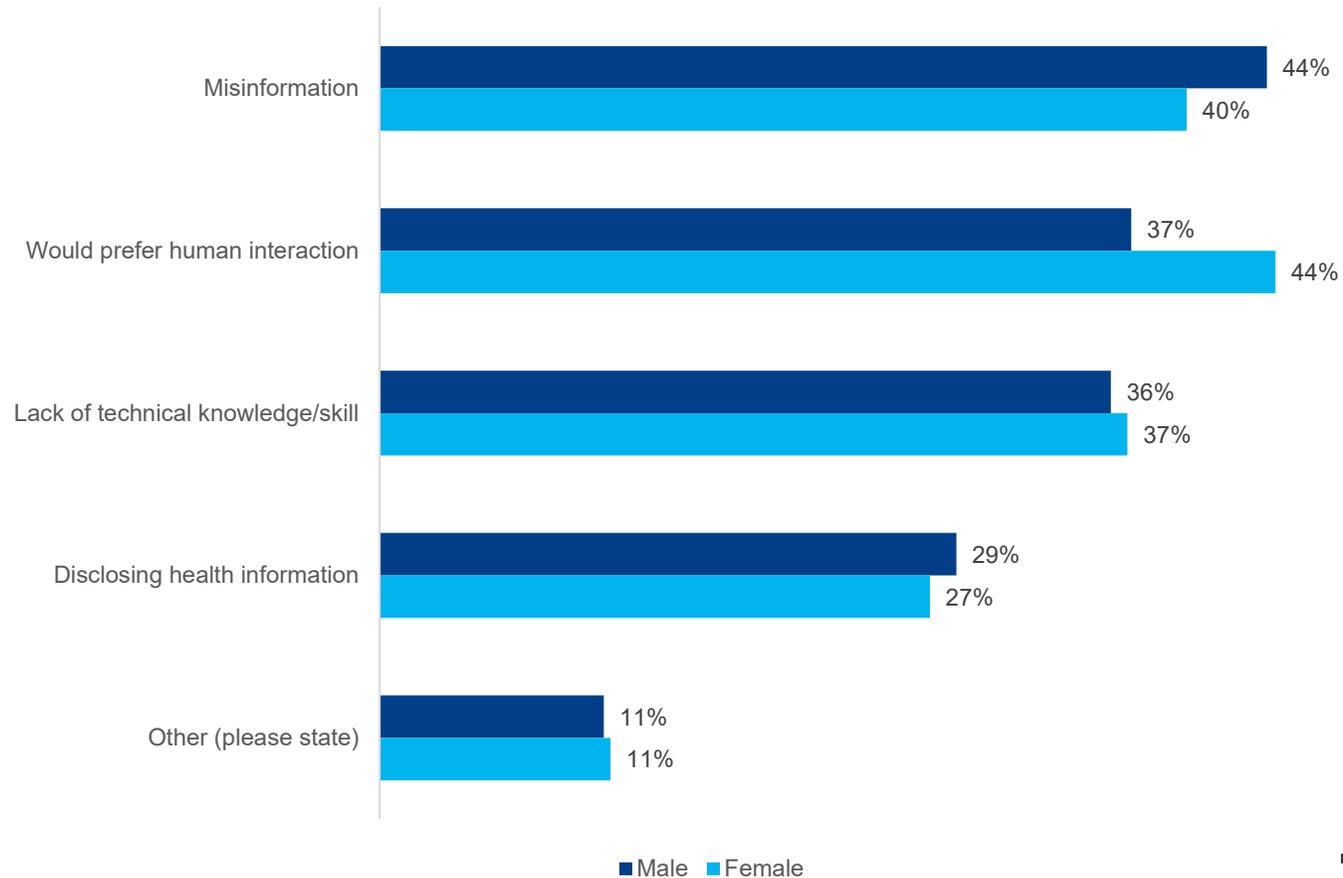
Q23. What might stop you from using artificial intelligence to support your health?



- Misinformation and a preference for human interaction are the most common concerns, with **nearly four in ten** patients saying these factors could prevent them from using AI to support their health.
- Lack of technical knowledge or skills follows closely behind, **cited by a third of patients.**
- **One in four** are concerned about the disclosure of health information.

Barriers for men to use AI to support their health is misinformation, while for women the main reason is lack of human interaction

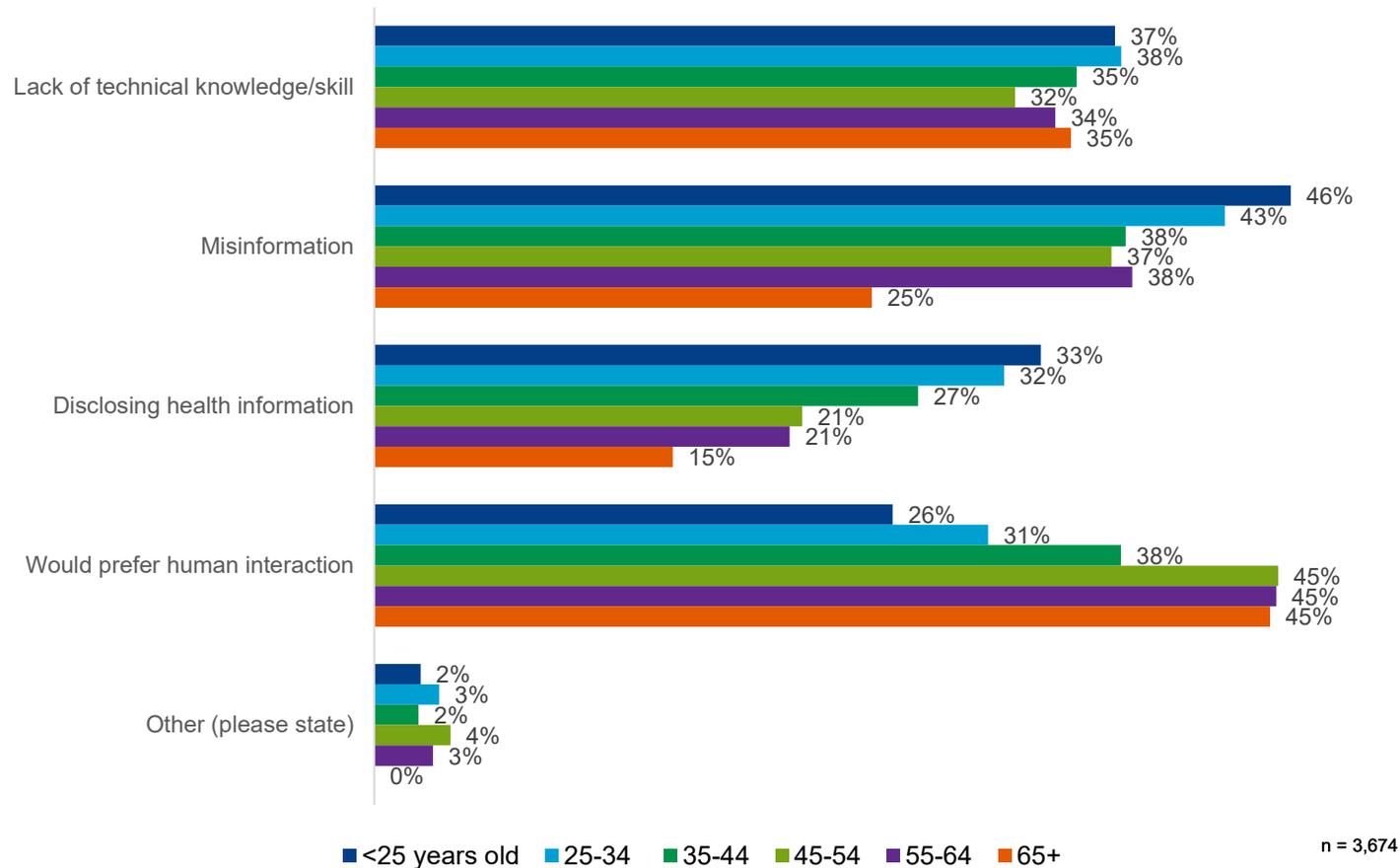
Q23. What might stop you from using artificial intelligence to support your health?



- **44%** of men and **40%** of women cite fear of misinformation as their biggest concern.
- A preference for human interaction deters **37%** of men and **44%** of women.
- **Roughly one-third feel they lack the technical know-how (36% men, 37% women).**

Younger patients cite misinformation as a barrier to using AI to support their health, while older generations cite a desire for human contact

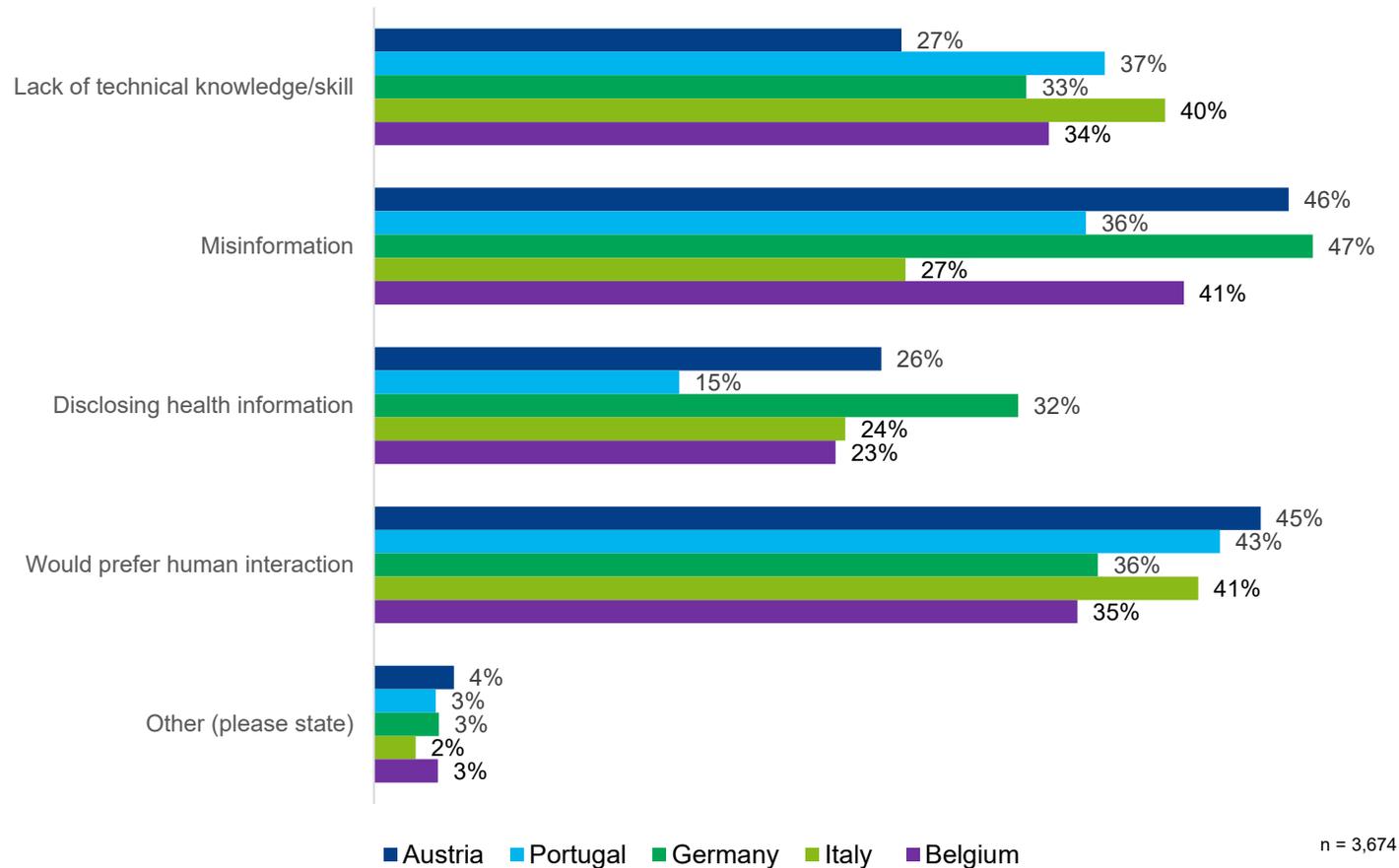
Q23. What might stop you from using artificial intelligence to support your health?



- Across most age groups, **misinformation is the top barrier (38–46%)**, peaking at **46%** among 25–34-year-olds.
- **A strong preference for human interaction follows**, especially in the 45–54 and 55–64 brackets (both **45%**).
- Technical skill gaps also matter, cited by roughly **one-third of respondents (32–38%)**.

Misinformation and preference for human interaction top barriers to using AI

Q23. What might stop you from using artificial intelligence to support your health?

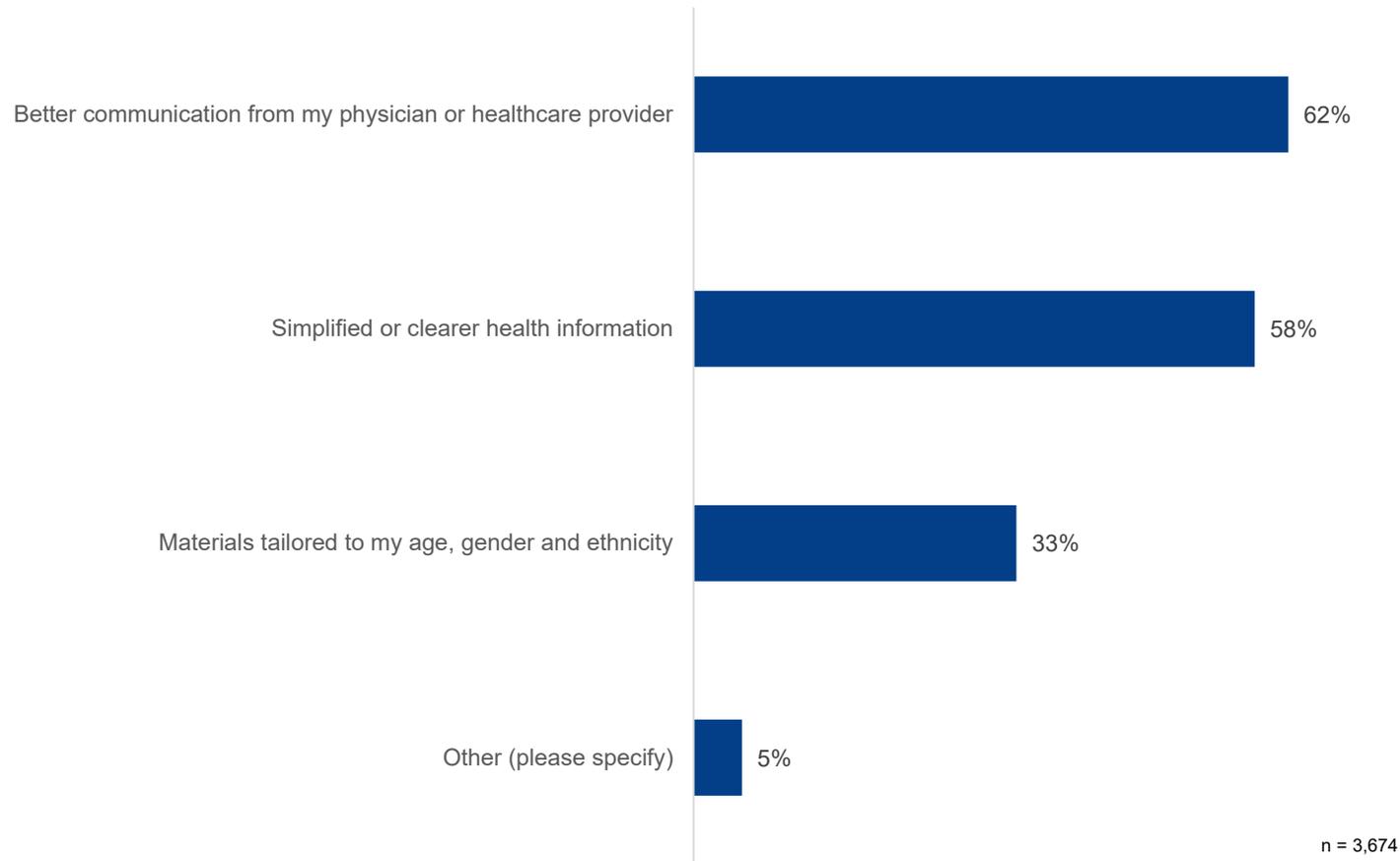


- **Almost half of Austrians (46%) and Belgians (41%)** cite misinformation as a key concern.
- A strong preference for human interaction deters **45% in Austria and 43% in Portugal**.
- **Lack of technical skill is highest in Germany (40%) and Italy (37%).**

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Patients express the need for better communication from healthcare professionals and simplified health information

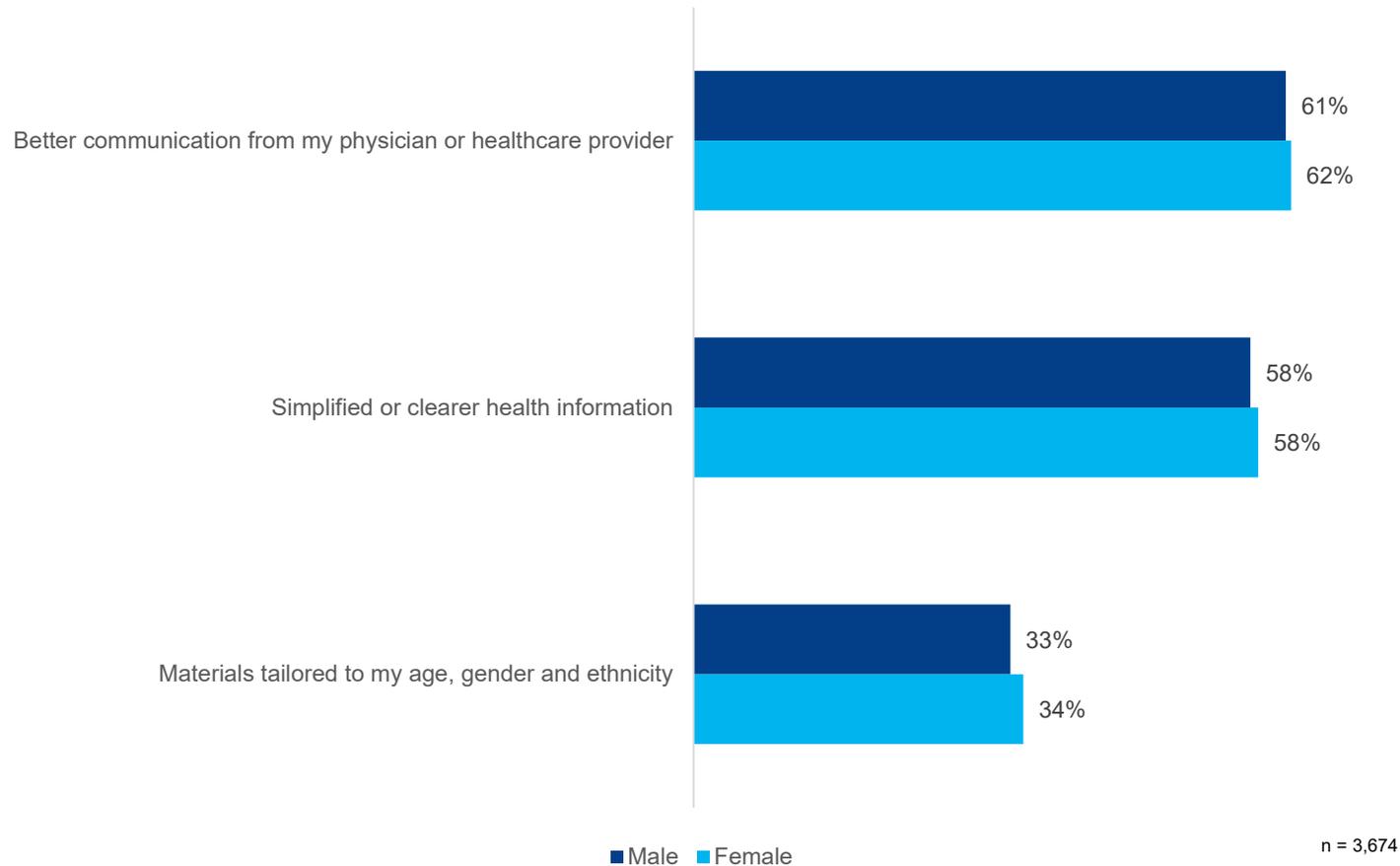
Q24. What support would be most helpful to improve your understanding of cardiovascular health? Please select all that apply.



- **57%** of respondents say that better communication from their physician or healthcare provider would help them understand cardiovascular health the most.
- Nearly as many (**55%**) say they needed simplified or clearer health information to improve their understanding.
- **One in three** express interest in materials tailored to their age, gender and ethnicity for more personalized guidance.

Both male and female patients want better communication with their physician and simplified and clearer health information

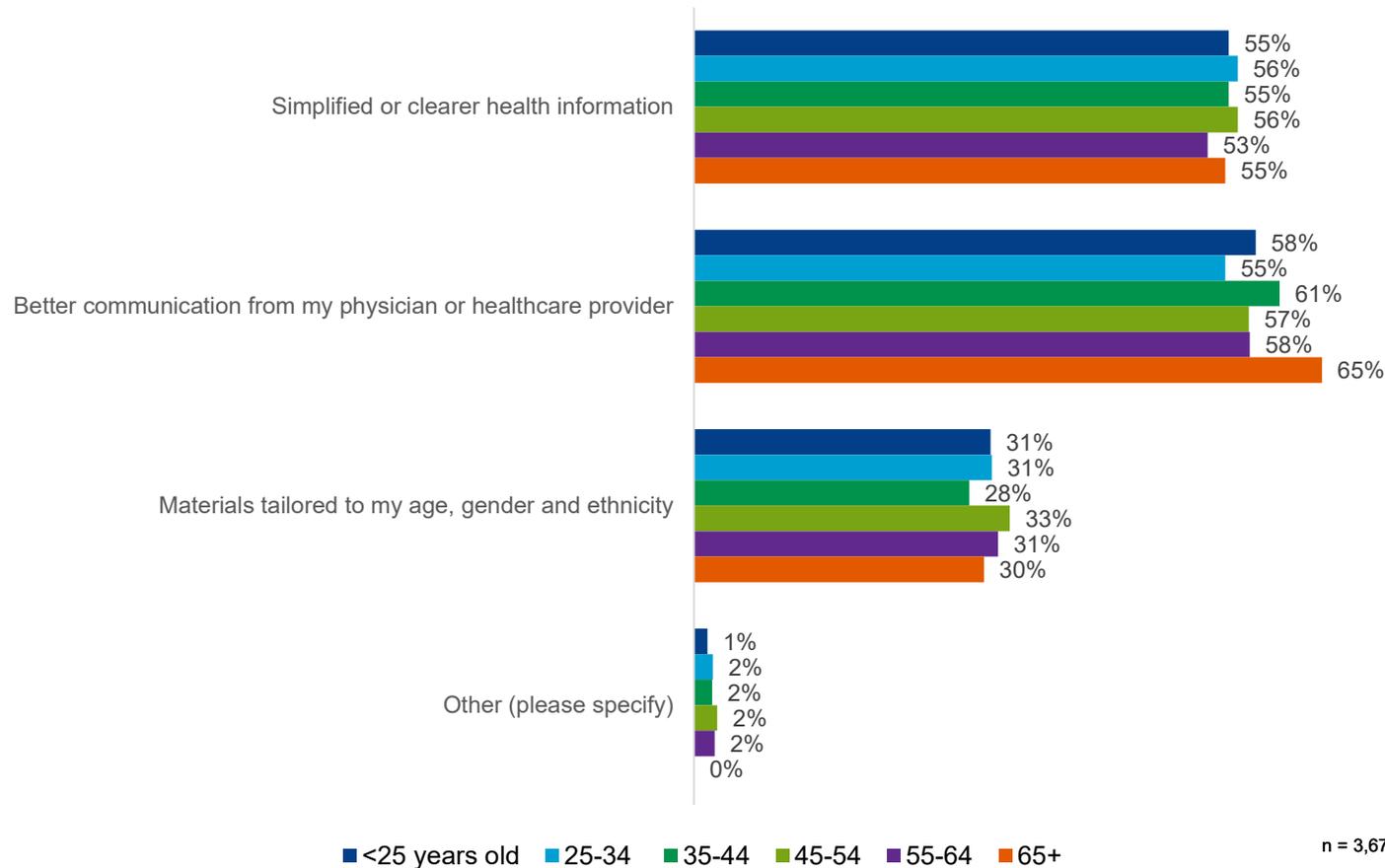
Q24. What support would be most helpful to improve your understanding of cardiovascular health? Please select all that apply.



- Over **60%** of men and women would like better communication from their physician or a health company.
- **58%** of men and women would like simpler or clearer health information.
- **A third of men and women want material things that are specially tailored to them.**

Better communication tops patient wish list for clearer heart health guidance

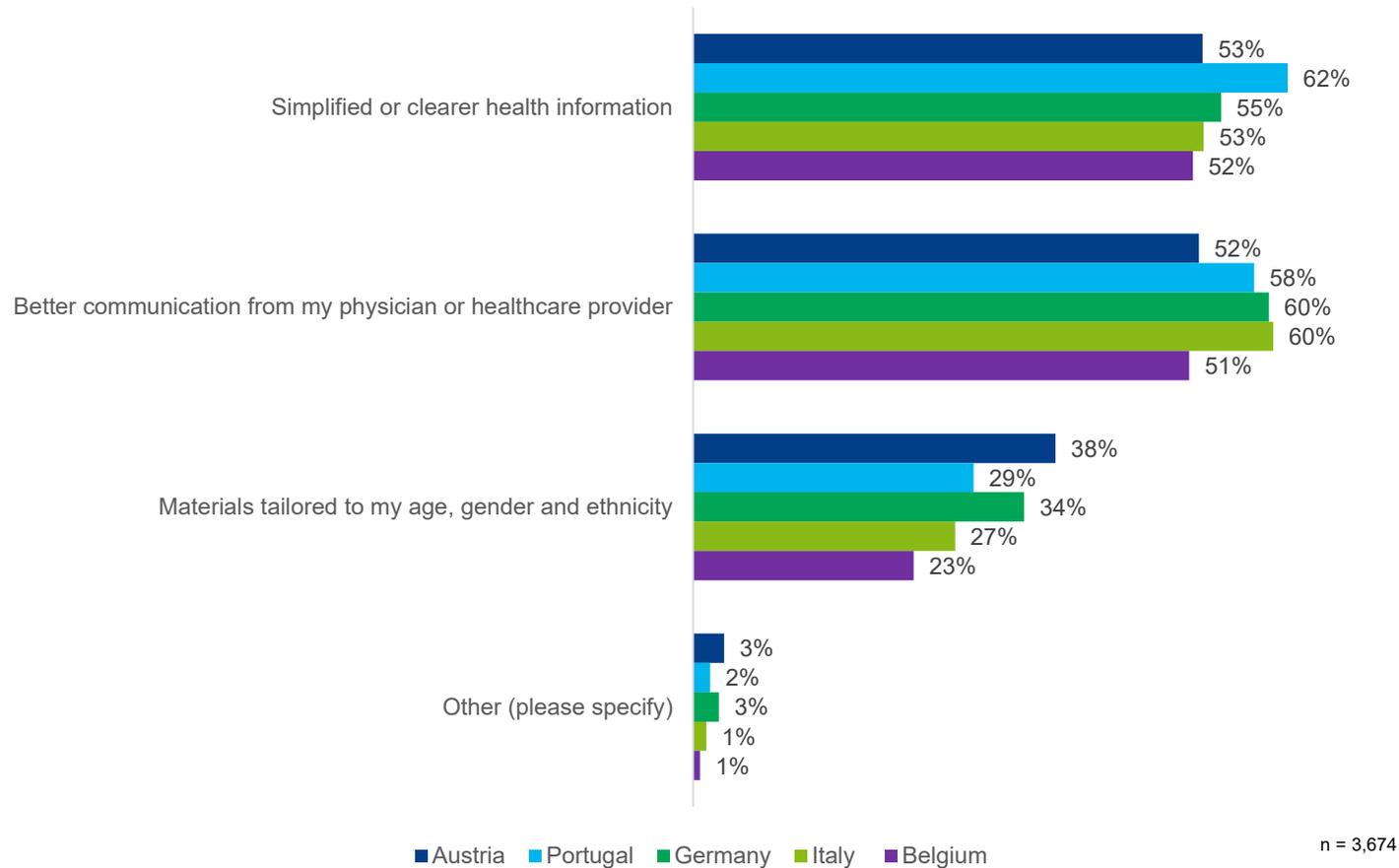
Q24. What support would be most helpful to improve your understanding of cardiovascular health? Please select all that apply.



- **Across all age groups, better communication from physicians or healthcare providers is the most requested support (55–65%), peaking at 65% among those 65+.**
- Simplified or clearer health information follows closely (53–56%), **indicating a strong desire for more accessible materials.**
- About 30–33% also want materials tailored to their age, gender, and ethnicity, **highlighting the value of personalized resources.**

Simplified access to health information and better communication are helpful to patients in all countries for improving their understanding of CV health

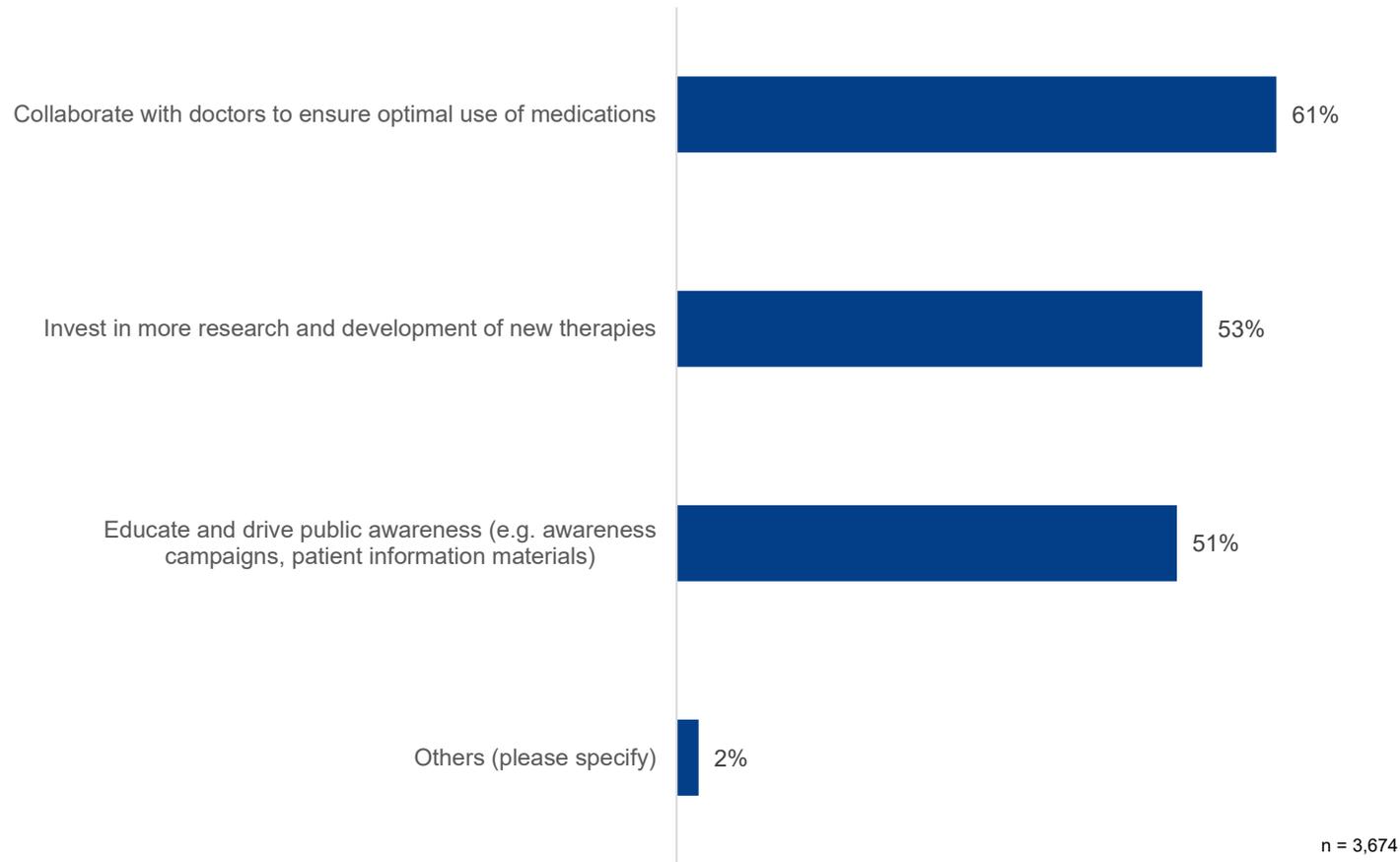
Q24. What support would be most helpful to improve your understanding of cardiovascular health? Please select all that apply.



- In Portugal, the need for simplified information is the highest, whereas Germany and Italy see the greatest need for better communication.

Over half believe collaboration between pharmaceutical companies and doctors is crucial for patients to improve cardiovascular health

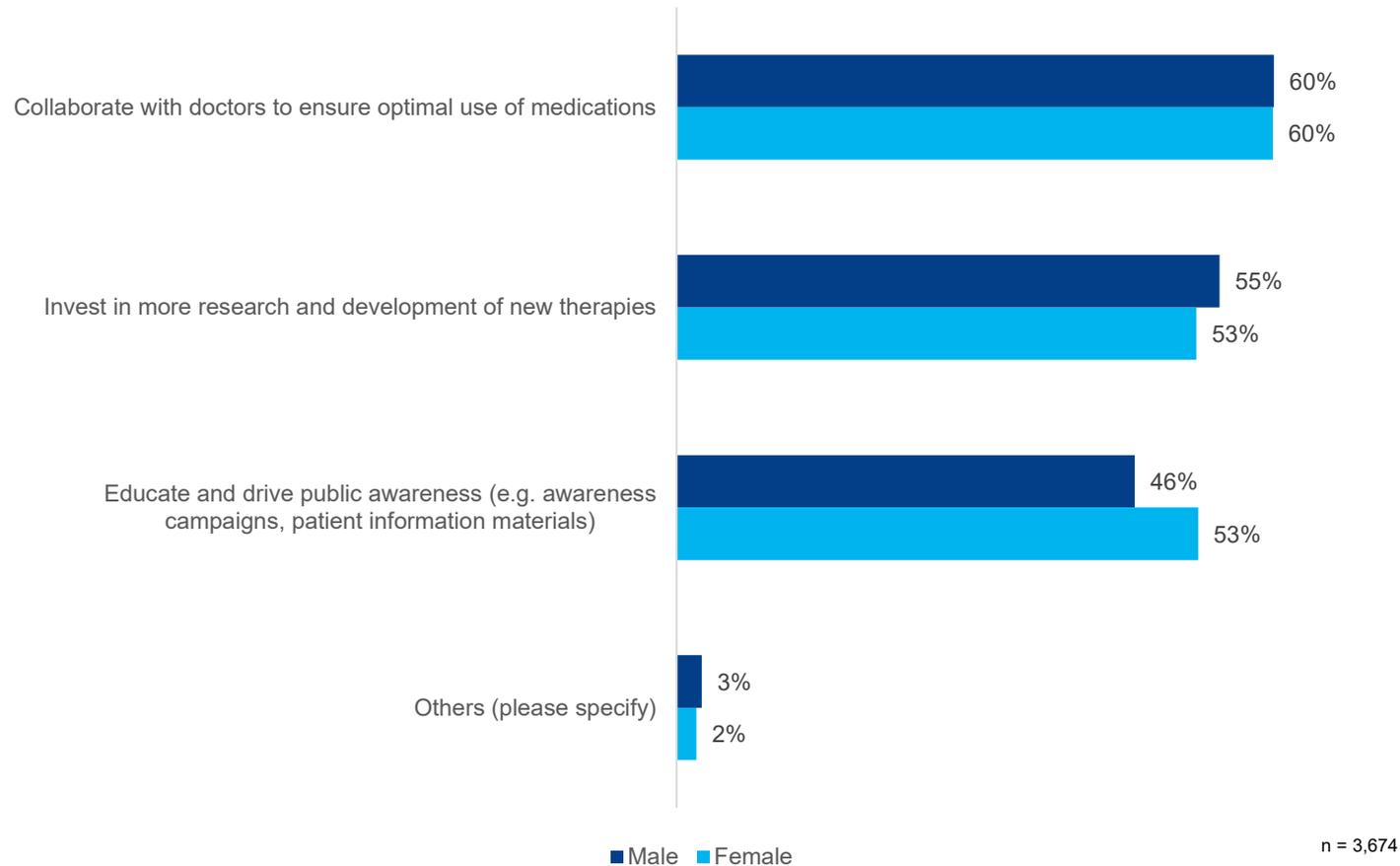
Q25. How can pharmaceutical companies better support people in improving their cardiovascular health?



- **61%** of patients rated collaboration with doctors to ensure optimal use of medications **as the leading priority**.
- **Half of patients** selected investing in further research and development of new therapies.
- Educating the public and raising awareness came in third with **51%** of patients opting for this.

Both genders want medical-research collaboration – women prioritise public awareness

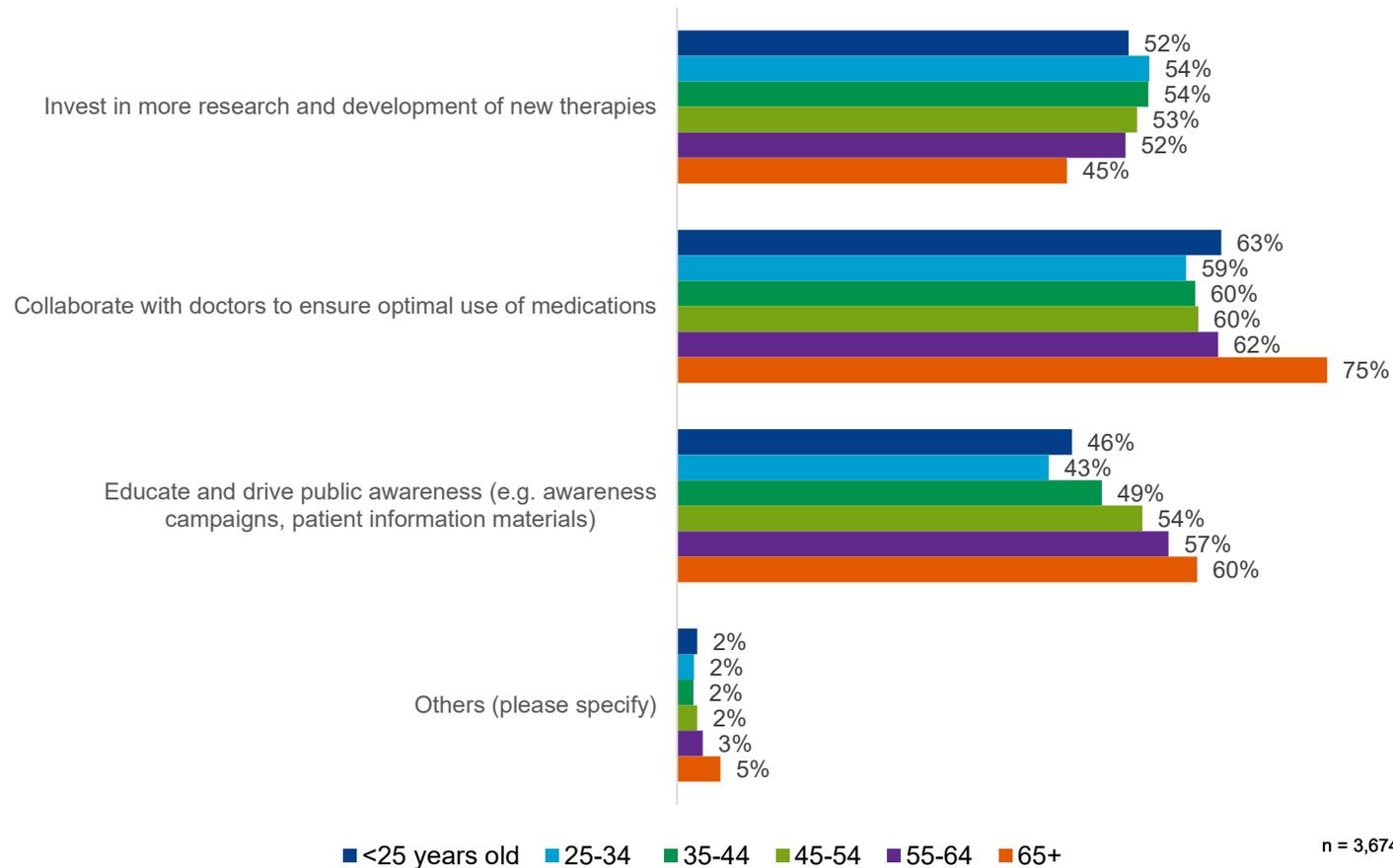
Q25. How can pharmaceutical companies better support people in improving their cardiovascular health?



- Male and female patients agree that working with physicians to ensure optimal use of medications is the best way for pharmaceutical companies to better help people improve their cardiovascular health.
- However, **female patients also want more education and awareness efforts from pharmaceutical companies**, with **53%** in favor, compared to **46%** of male patients.

Collaboration with physicians is seen as pharma's main support role

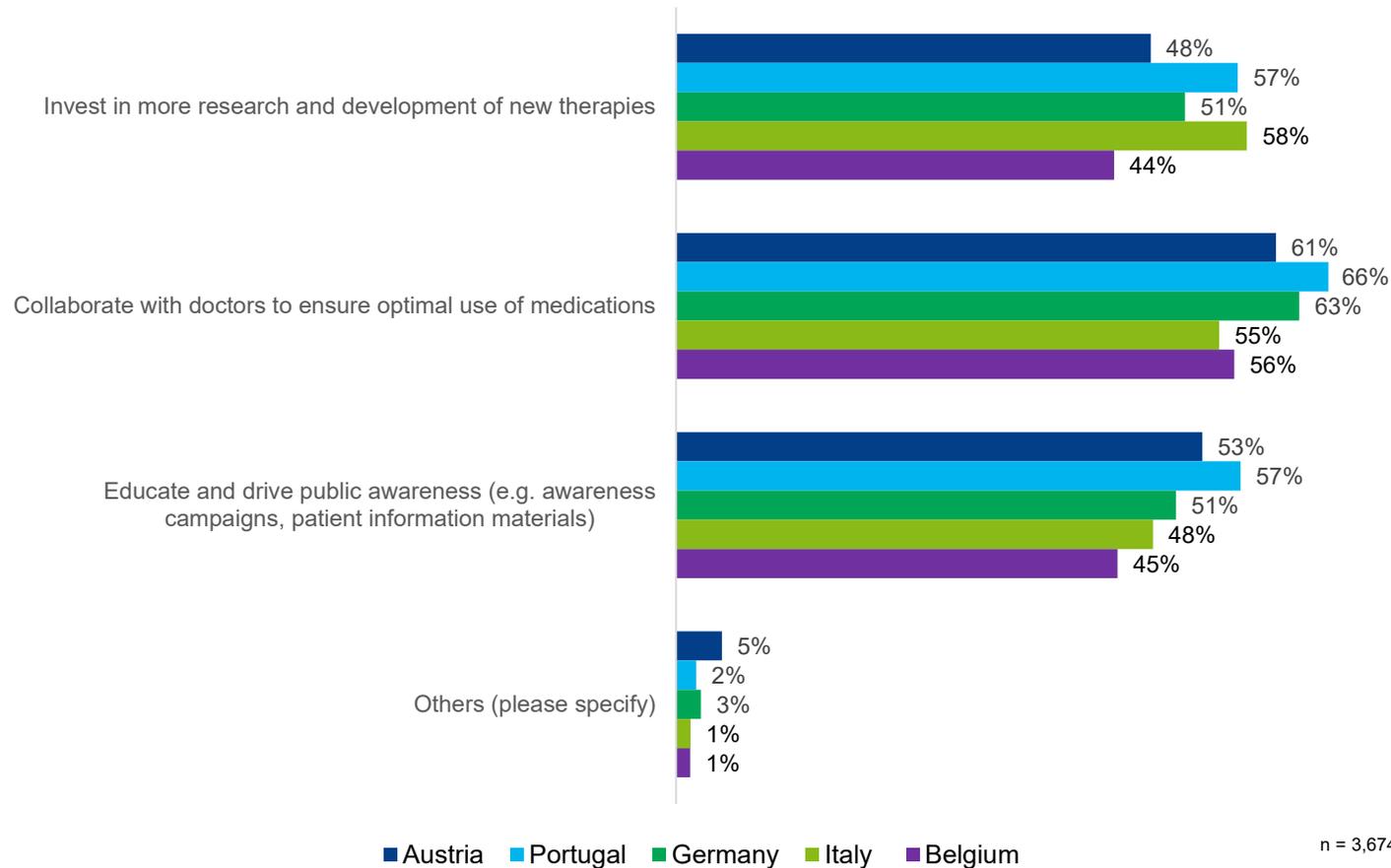
Q25. How can pharmaceutical companies better support people in improving their cardiovascular health?



- Across all ages, collaborating with doctors to optimise medication use ranks highest (**59–75%**), peaking at **75%** among those 65+.
- Investing in R&D for new therapies is consistently valued by **about half of respondents (52–54%)**.
- Educating and driving public awareness is important for **nearly half (46–60%)**, with **strongest demand (60%)** from those 65+.

Collaboration with physicians is the top way pharma can support cardiovascular health

Q25. How can pharmaceutical companies better support people in improving their cardiovascular health?

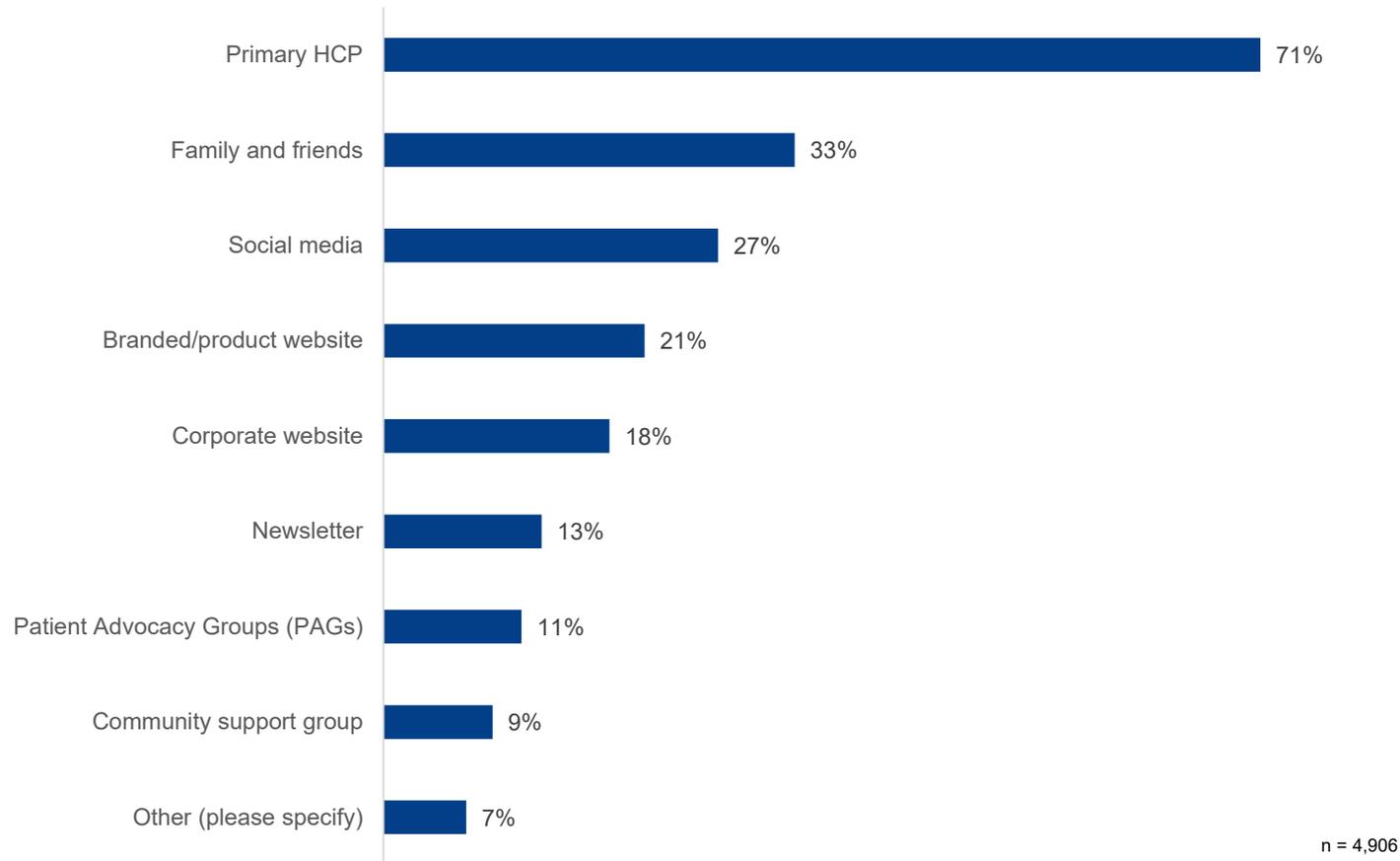


- Across all countries, **the majority look to pharmaceutical companies to collaborate with doctors for optimal medication use (61% Austria, 66% Portugal, 63% Germany, 55% Italy, 56% Belgium).**
- Investing in research and development of new therapies ranks second (**57% Austria, 51% Portugal, 58% Germany, 48% Italy, 44% Belgium**).
- **Nearly half also want more public education and awareness campaigns (53% Austria, 57% Portugal, 51% Germany, 48% Italy, 45% Belgium).**

General Public

General public mostly turn to their primary physician when they search for cardiovascular health information

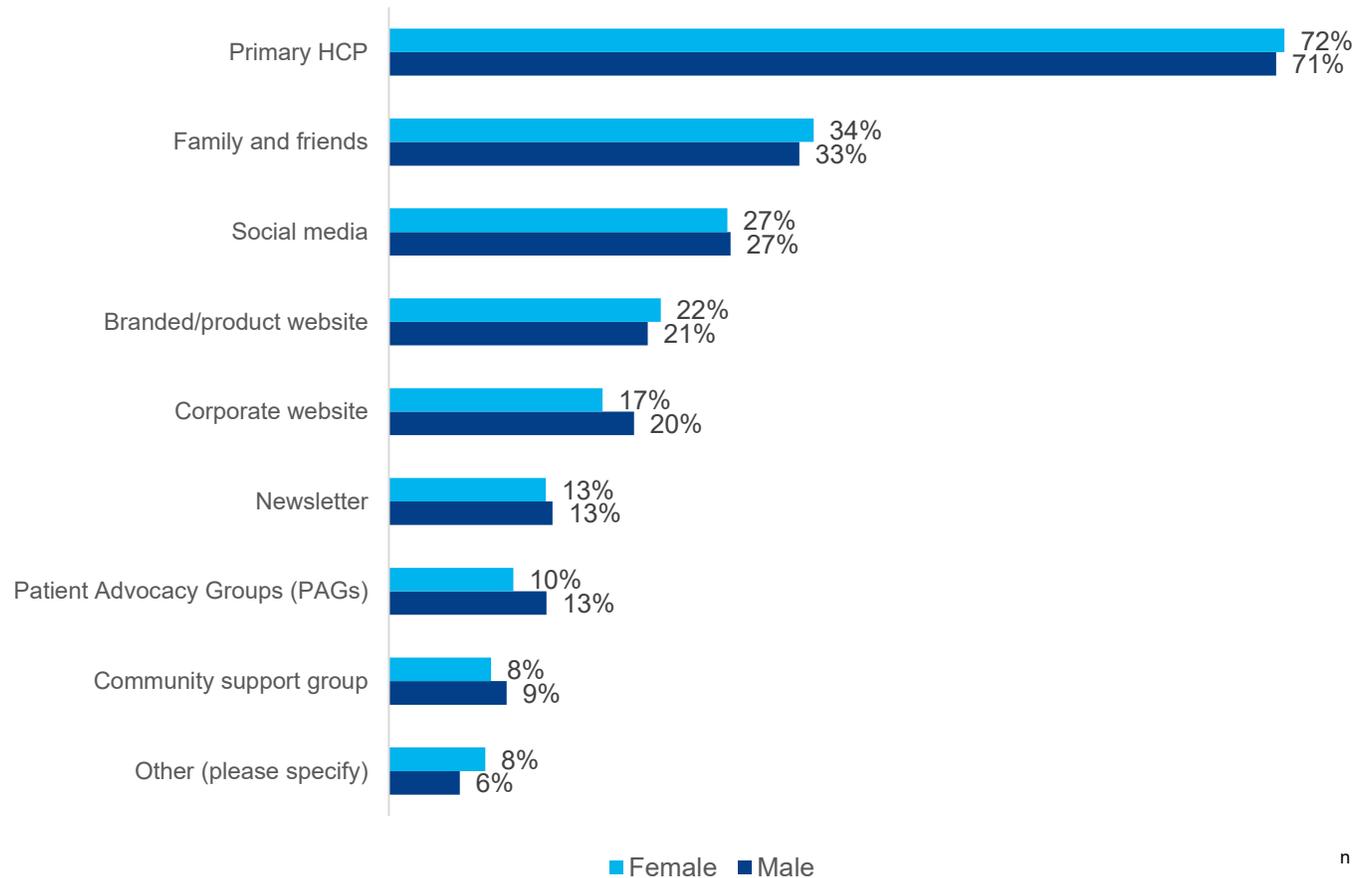
Q5. Where do you search for cardiovascular health information?



- **71%** of respondents turn to their primary physician for cardiovascular health information.
- Family and friends come in second with a **third of respondents** citing them as a source of information.
- **27%** of individuals use social media to search for cardiovascular health information.
- **One in five** seek information from branded or product websites or corporate websites.
- Newsletters (**13%**), patient advocacy groups (**11%**) and community support groups (**9%**) are less likely to be consulted for cardiovascular health information.

Primary physicians are the most important point of contact for cardiovascular health information for both men and women

Q5. Where do you search for cardiovascular health information?

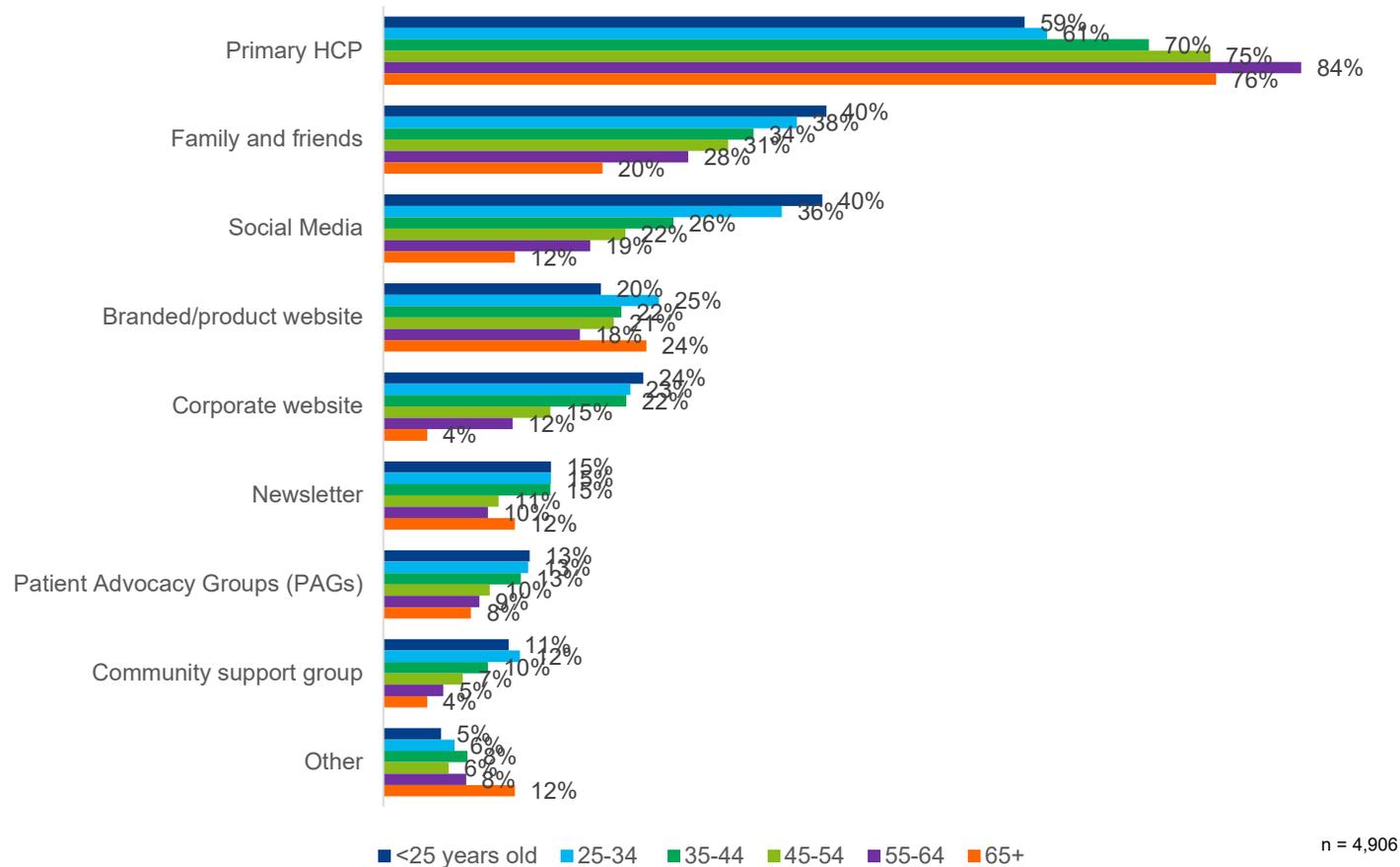


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- There are **no significant differences between where men and women** search for cardiovascular health information

For all age groups, physicians are the most frequently named point of contact when they are looking for cardiovascular health information

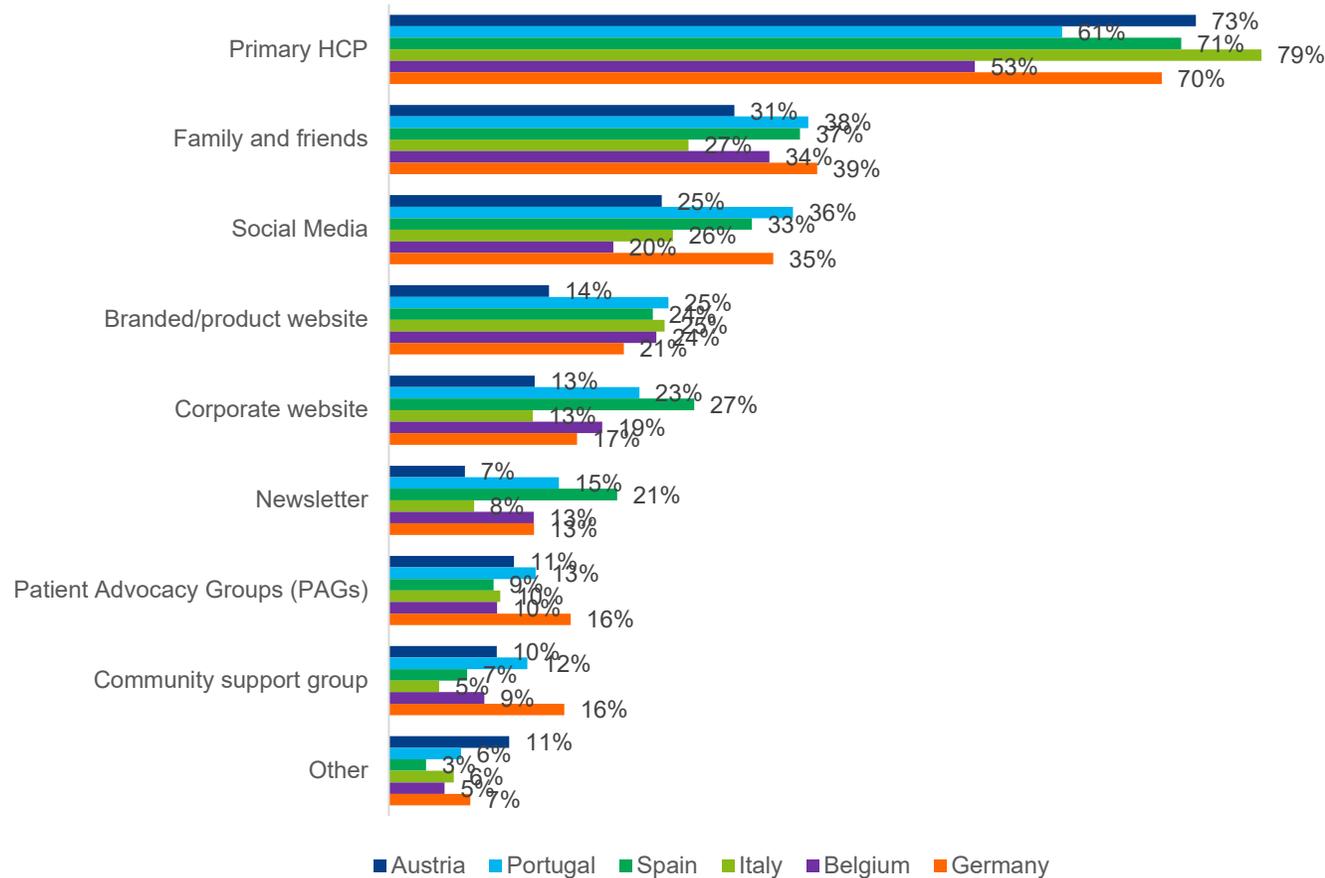
Q5. Where do you search for cardiovascular health information?



- For all age groups, physicians are the most frequently cited point of contact when looking for information on cardiovascular health. **People over 55 years of age cite this source more often than average.**
- By contrast, **younger target groups are more likely to turn to family and friends or social media** when seeking information about cardiovascular health.

For all countries, primary physicians are the main point of contact when searching for cardiovascular health information

Q5. Where do you search for cardiovascular health information?

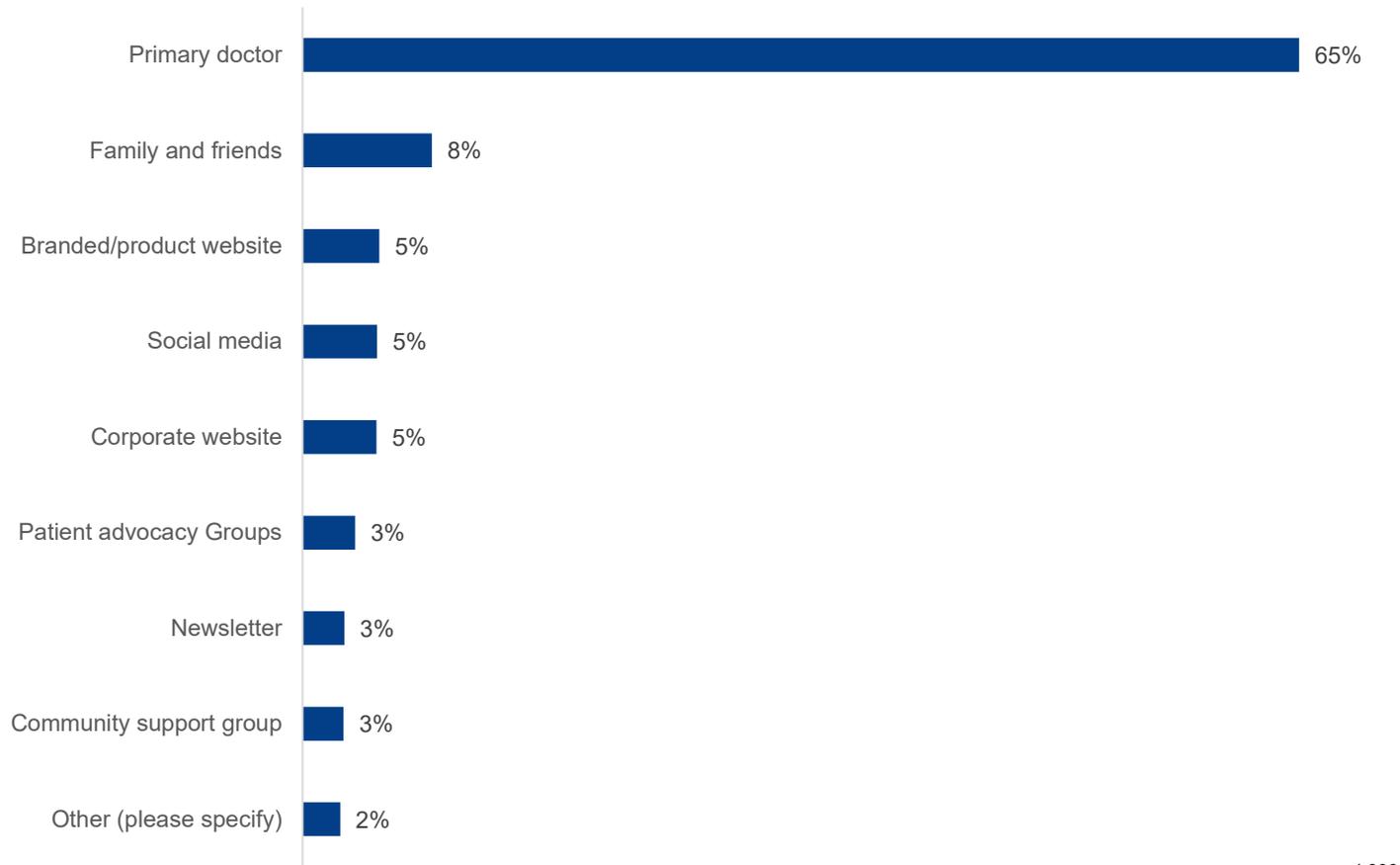


- For all countries, physicians are the most common source of health information. **In Belgium, people use this source less than average.**

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Primary doctors emerge as the clear leader in trustworthiness, with 2 out of 3 citing them as the most trustworthy

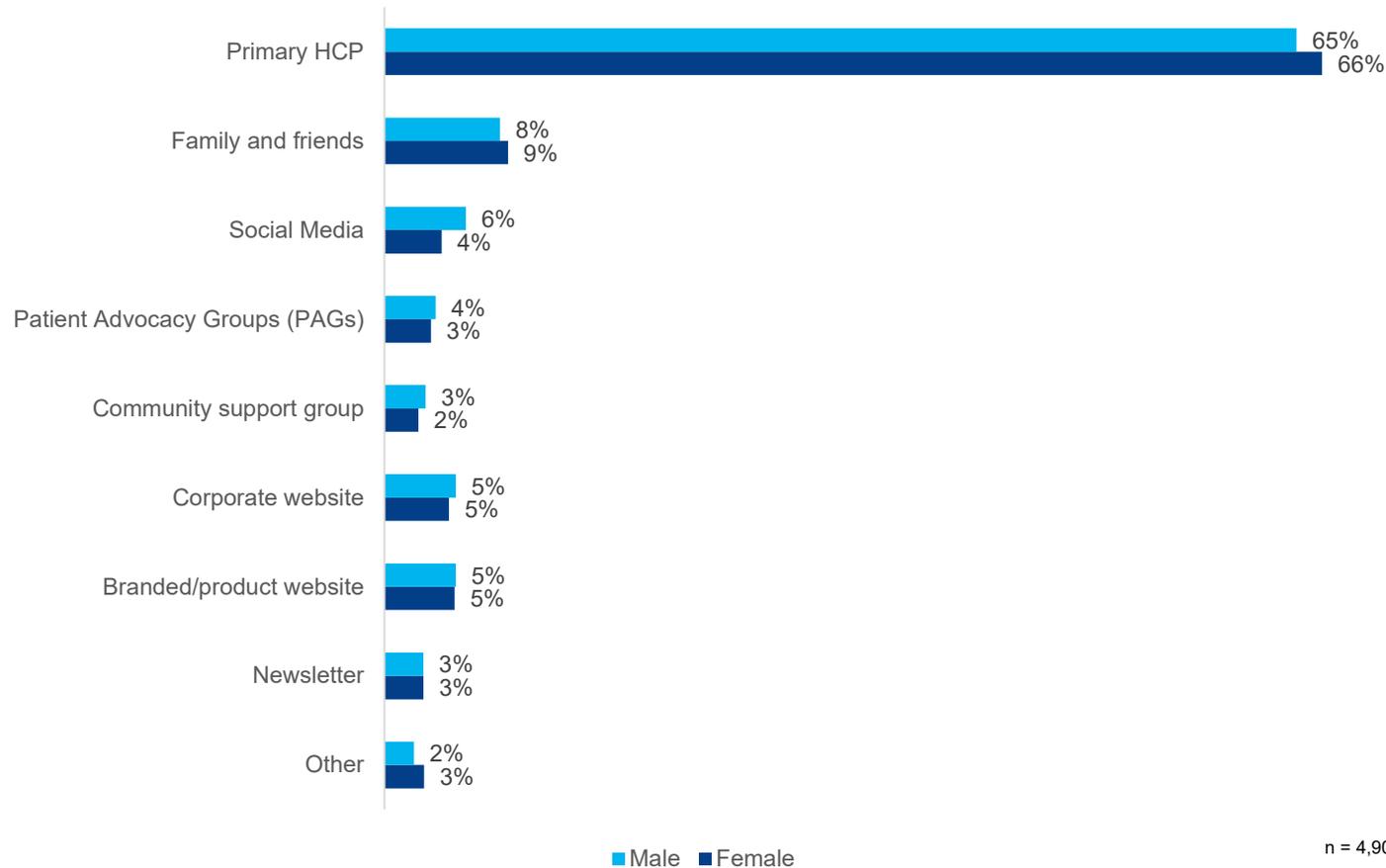
Q6. Which of these do you feel is most trustworthy?



- Primary doctors overwhelmingly dominate, with about **two thirds of respondents seeing them as the most trustworthy source of information**. Conversely, this also means that **one in three people does not trust them completely**.
- Family and friends come in a distant second, with **8%** choosing them as the most trustworthy source.
- Branded/product websites, social media and corporate websites are considered most trustworthy by **5%** of respondents.
- Patient advocacy groups, newsletters, and community support groups were each chosen by **3%**.

Men and women name both primary care physicians as the most trustworthy source of information on cardiovascular health

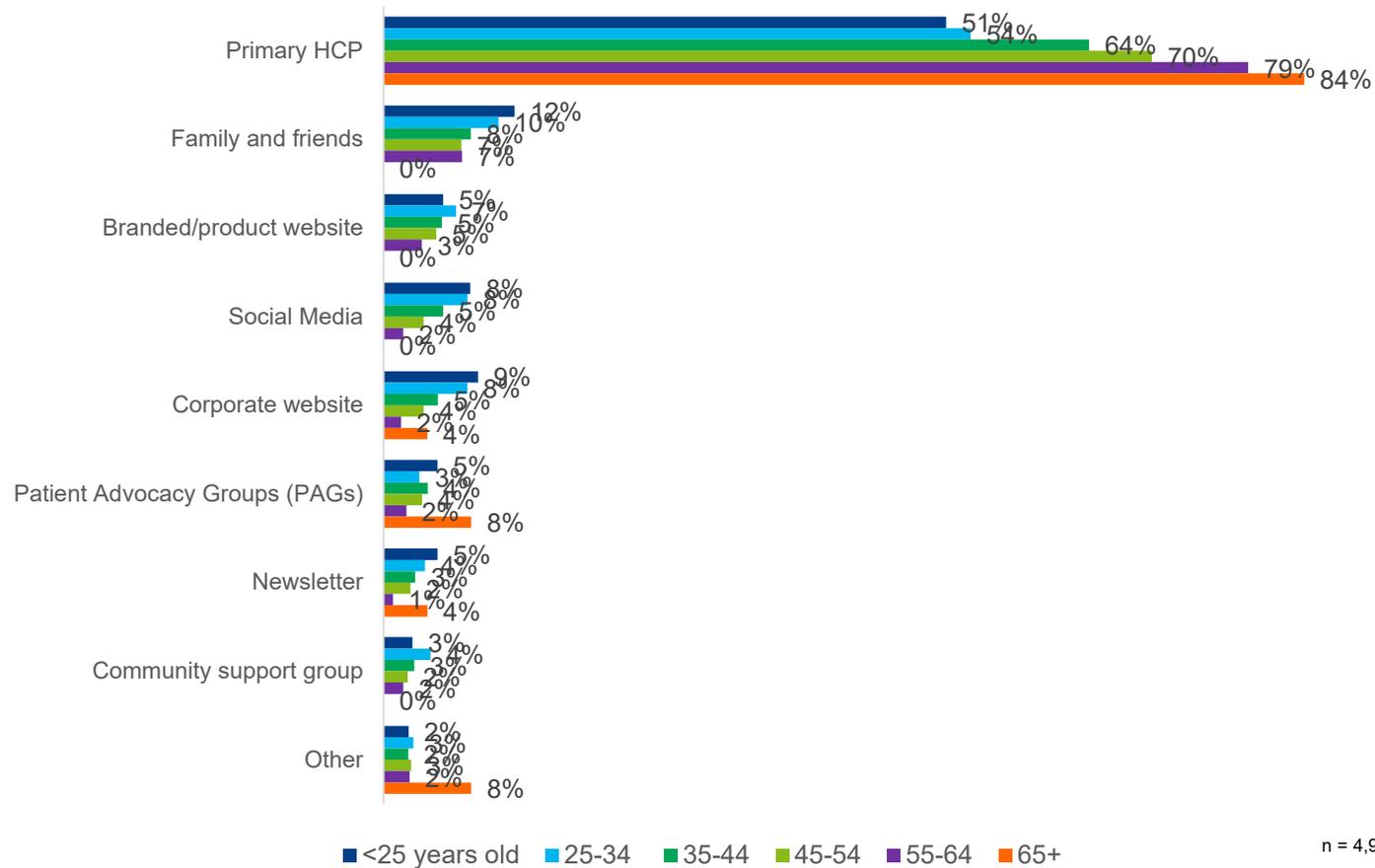
Q6. Which of these do you feel is most trustworthy?



- **There are no significant differences between the genders** in terms of the trustworthiness of sources of information on cardiovascular health.

Trust in primary HCPs is notably highest among older generations

Q6. Which of these do you feel is most trustworthy?

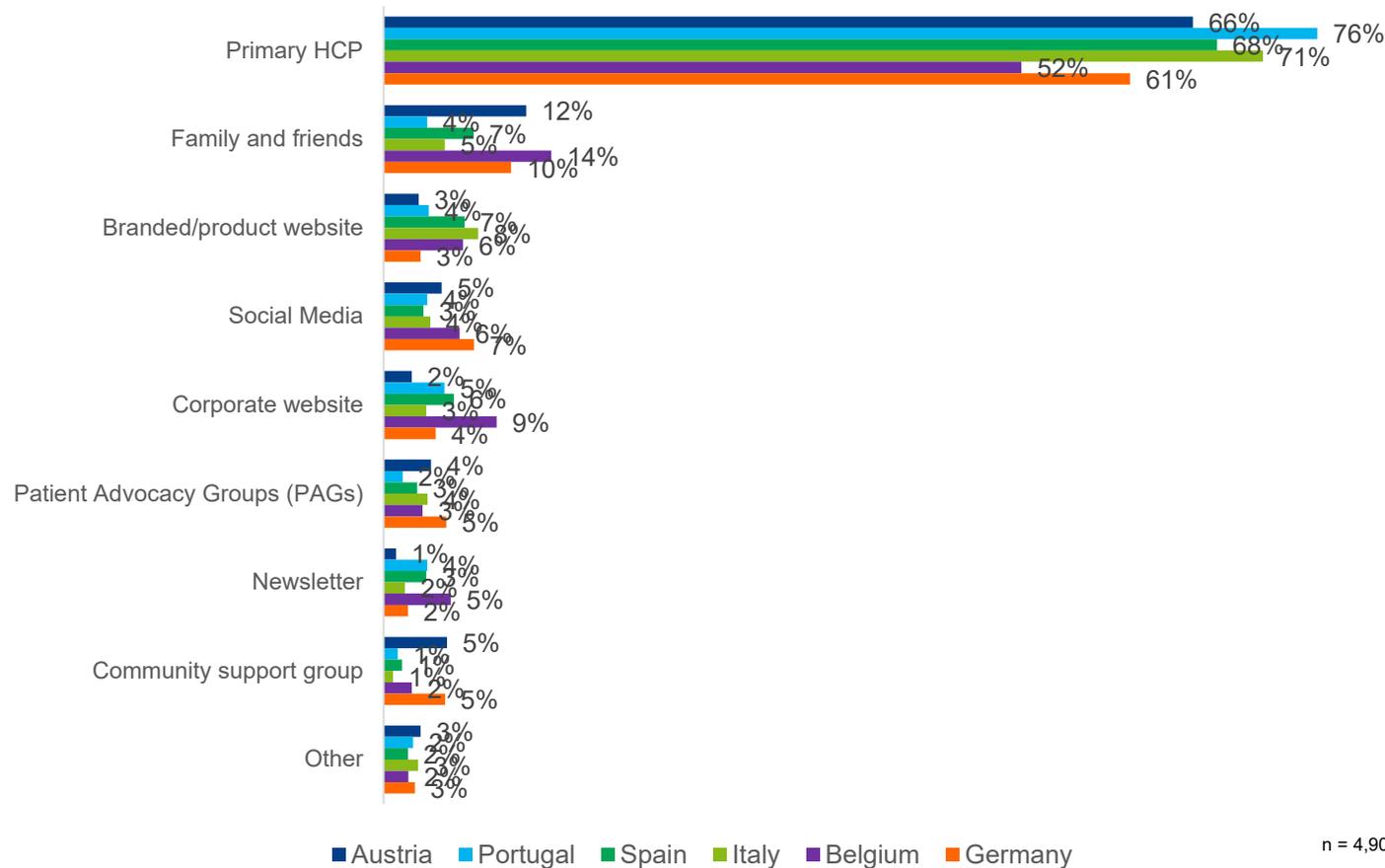


- With the exception of primary physicians, **there are few notable differences between the generations when it comes to the most trusted source of cardiovascular health information.**
- It is striking that older generations are **twice as likely to say that primary HCPs are the most trusted source for them.**

n = 4,906

Primary physicians are the most trusted by all countries

Q6. Which of these do you feel is most trustworthy?

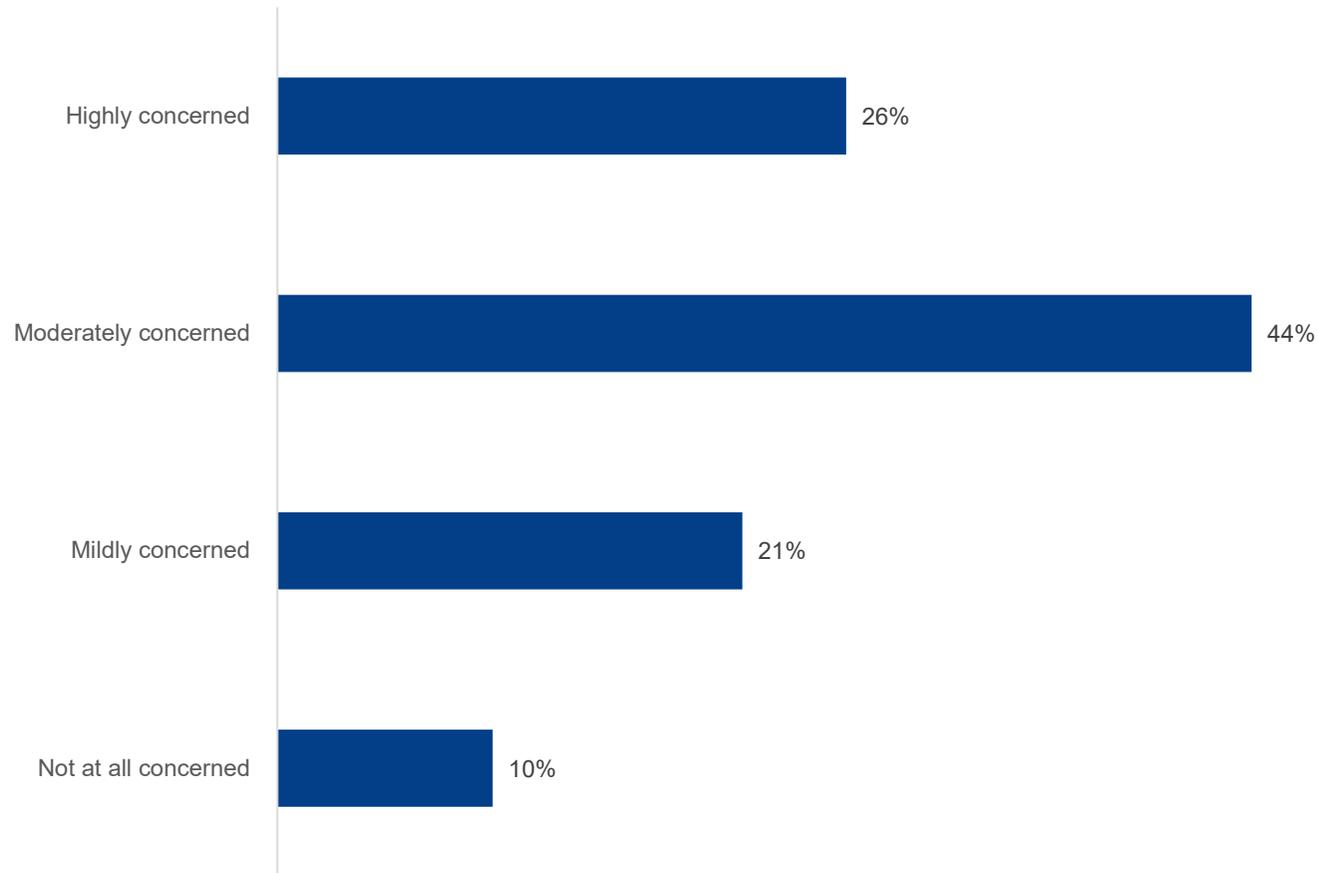


- In Belgium, there is **less trust than average for physicians** whilst they tend to place more trust than other countries in family & friends and corporate websites.

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9 out of 10 respondents express concern about misinformation in the media about cardiovascular health

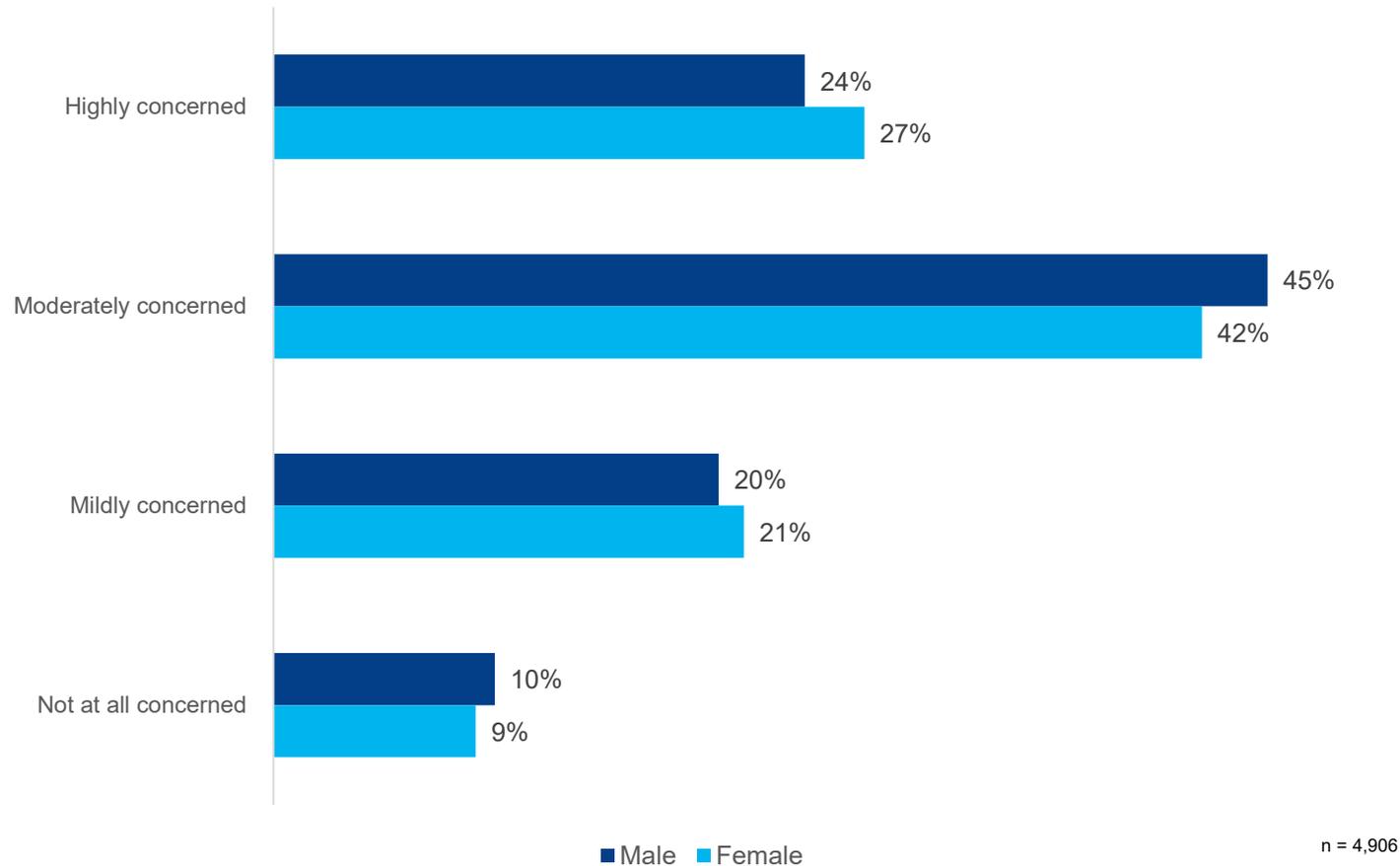
Q7. To what level are you concerned about misinformation in the media regarding cardiovascular health information?



- **One in four** are very concerned about misinformation in the media about cardiovascular health.
- **Nearly half of respondents (44%)** are moderately concerned about misinformation in the media about cardiovascular health.
- **One in five** are mildly concerned.
- **10%** of participants replied they are not at all concerned.

Both men and women are equally concerned about misinformation, although women are slightly more likely to say they are very concerned

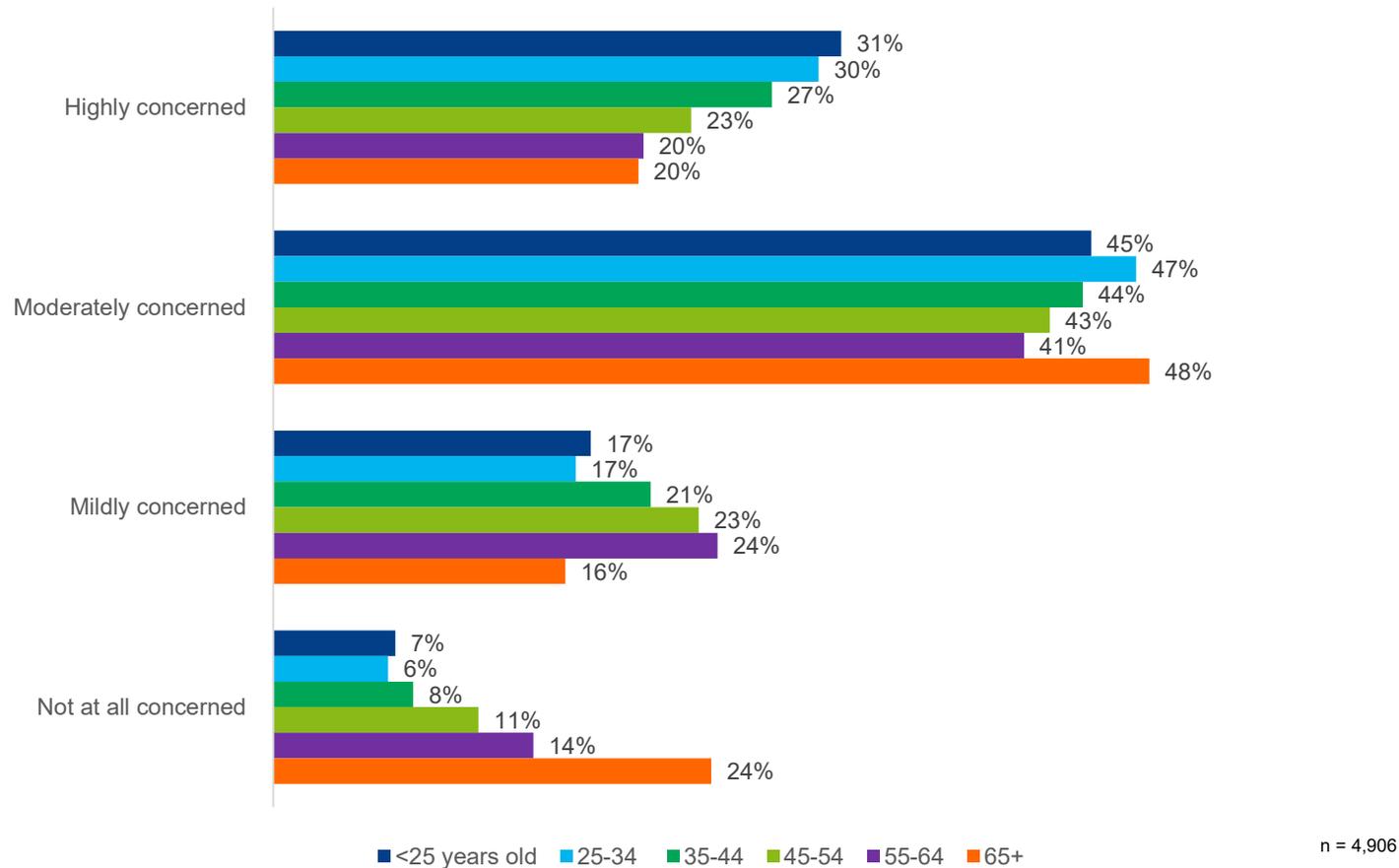
Q7. To what level are you concerned about misinformation in the media regarding cardiovascular health information?



- **Men and women are equally concerned** about misinformation in the media regarding cardiovascular health.
- Overall, it can be said **that women are slightly more likely than men to be very concerned about misinformation in the media.**

Among young age groups, concern about misinformation in the media is most often very high

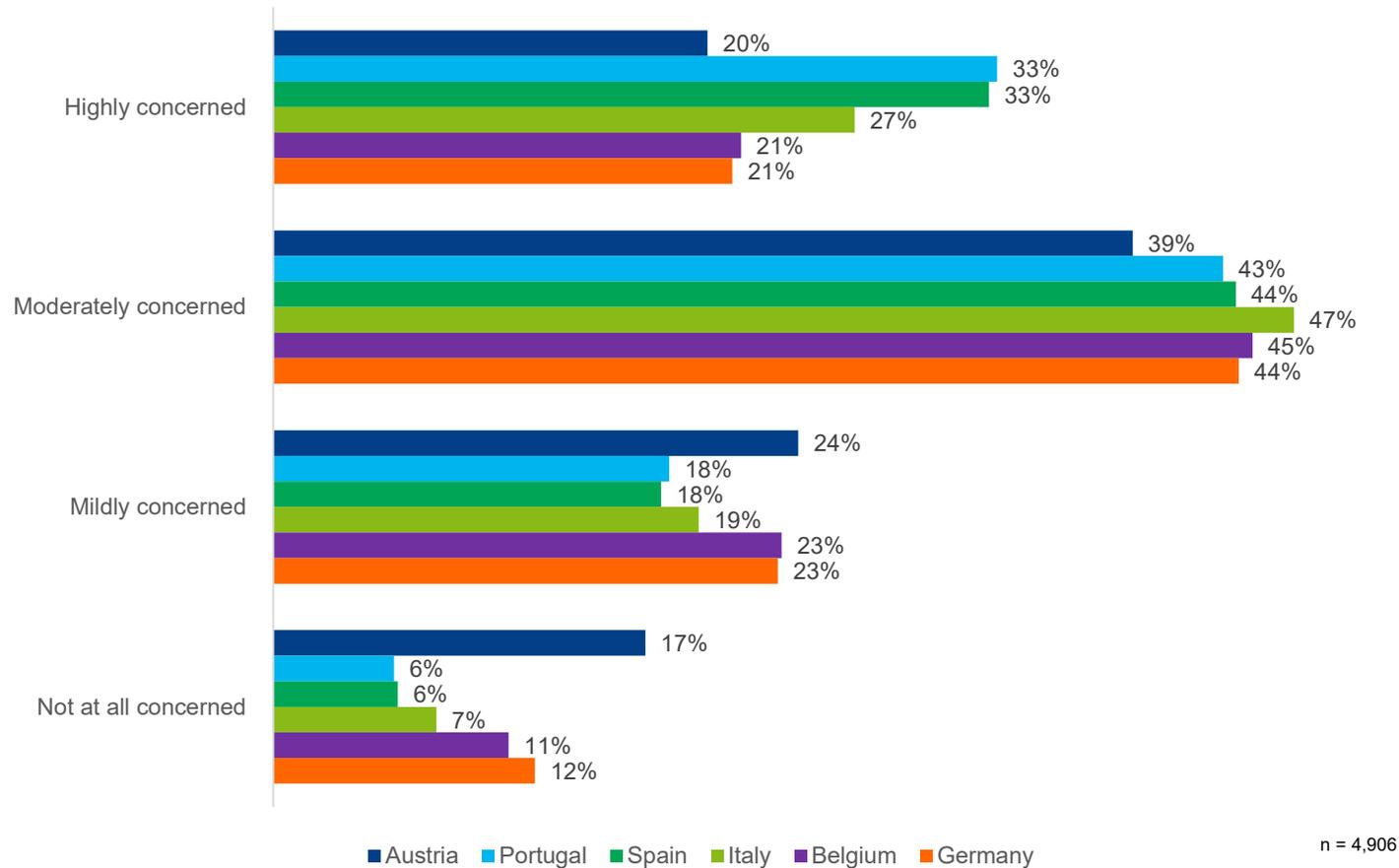
Q7. To what level are you concerned about misinformation in the media regarding cardiovascular health information?



- The graph shows that **younger target groups (under 34 years of age) are more likely to be very concerned about misinformation** in the media about cardiovascular diseases.
- It is also striking that **one in four people over the age of 65 say they are not at all concerned about misinformation** in the media.
- Overall, it can be said that all age groups are concerned about misinformation in the media regarding cardiovascular health.

In Spain and Portugal misinformation is of particularly high concern among the general public

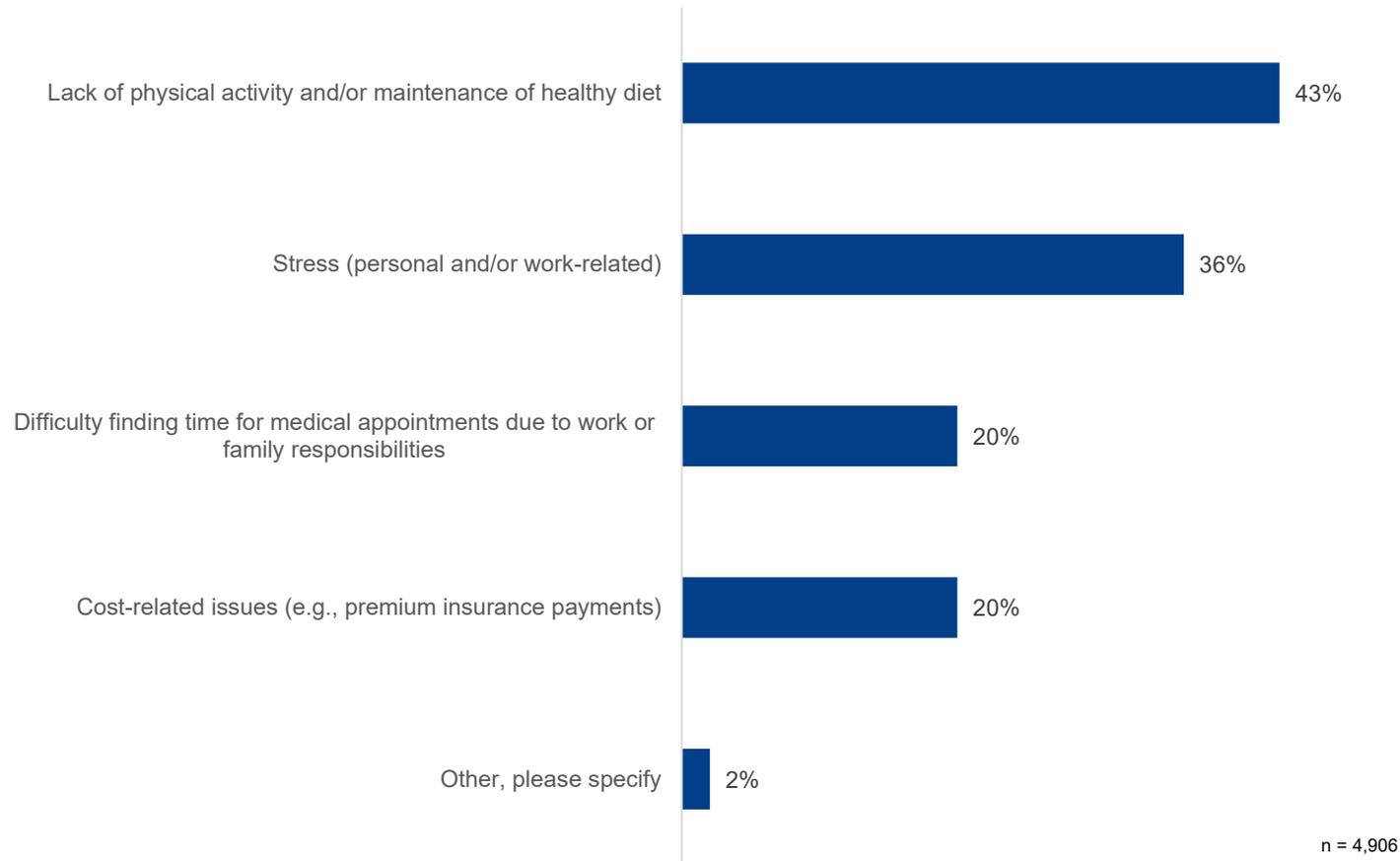
Q7. To what level are you concerned about misinformation in the media regarding cardiovascular health information?



- In Austria, the highest proportion of the general public are not at all concerned about misinformation in the media.
- All countries have shown concern over misinformation in the media regarding cardiovascular health, **but Spain, Portugal and Italy are showing the most concern.**

Lifestyle factors, such as physical activity and healthy diet are considered the main barrier to cardiovascular health

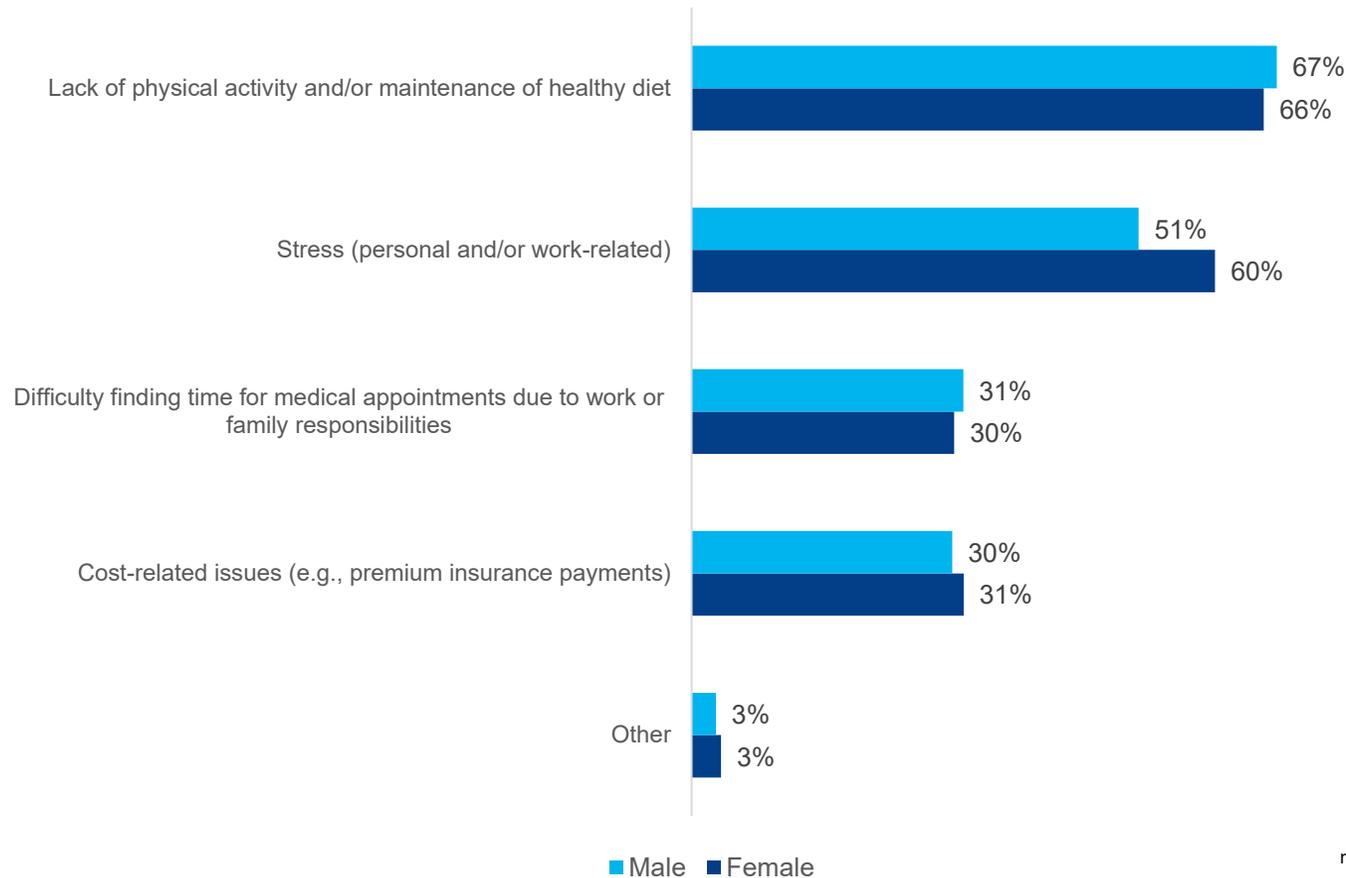
Q8. What are the main barriers to maintaining good cardiovascular health?



- Lack of physical activity and maintaining a healthy diet emerged as the top obstacle, cited by **43%** of respondents.
- Stress - both personal and work-related - came in second, with **36%** of respondents citing it as a major barrier to cardiovascular health.
- Difficulty finding time for medical appointments and cost concerns were each cited by **20%** of respondents.
- **20%** also name cost-related issue as main barrier to maintaining good cardiovascular health.

Women are significantly more likely than men to report that stress prevents them from maintaining their cardiovascular health

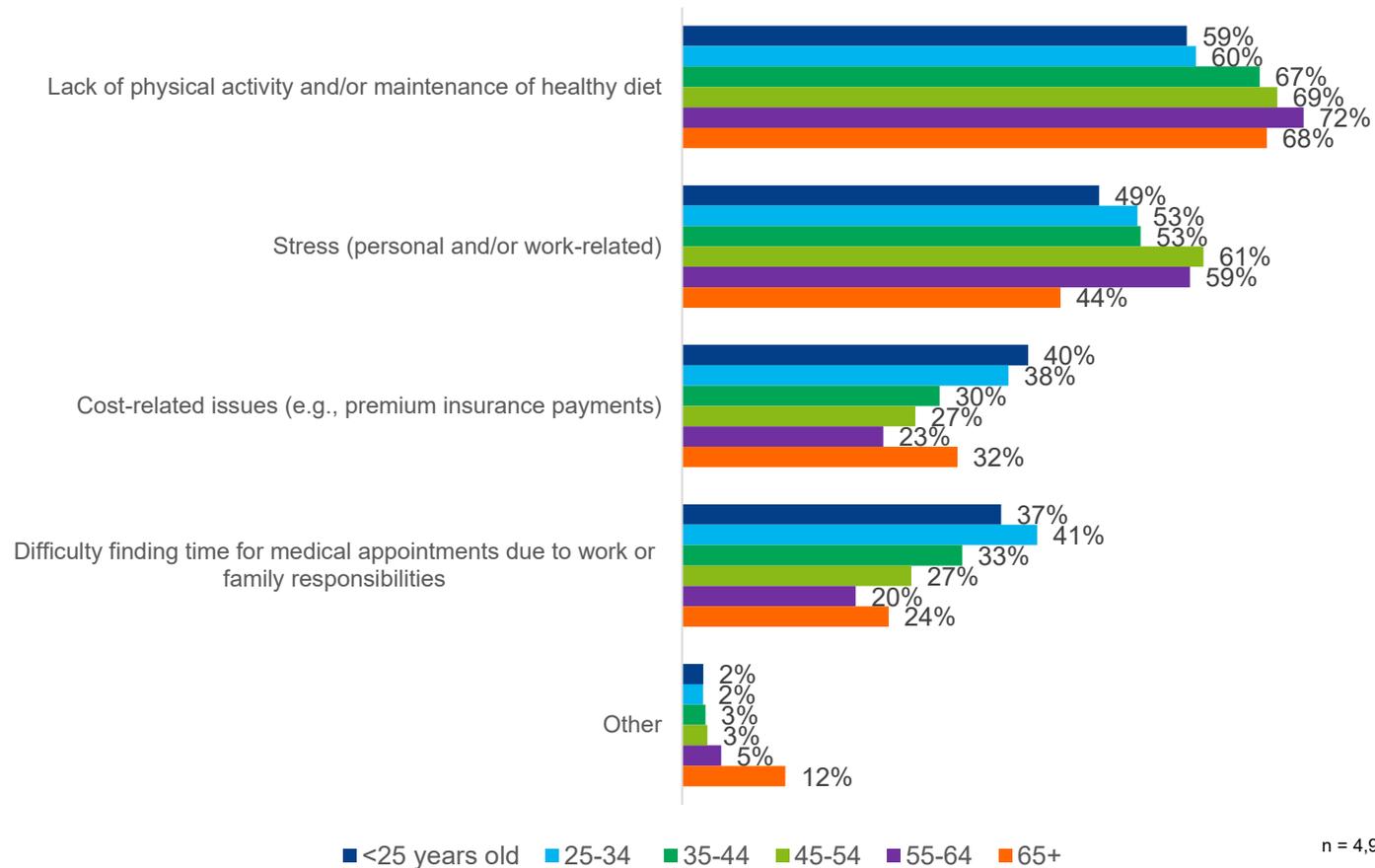
Q8. What are the main barriers to maintaining good cardiovascular health?



- **Lack of physical activity is the main barrier** to maintaining good cardiovascular health for both genders.
- **Among women, stress is a more significant barrier compared to men.**

Lifestyle factors, such as physical activity and healthy diet are considered the main barrier to cardiovascular health

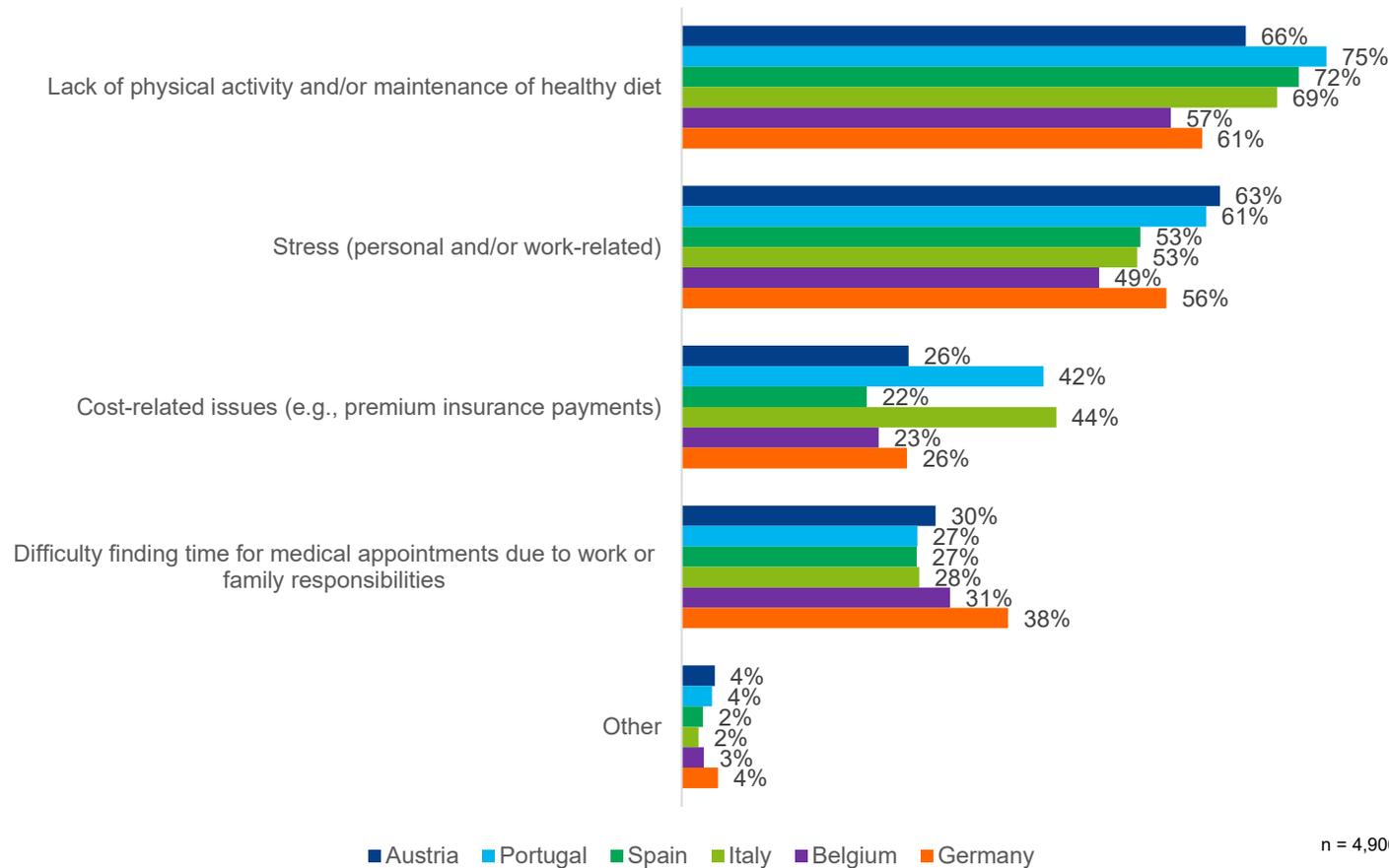
Q8. What are the main barriers to maintaining good cardiovascular health?



- **Individuals over the age of 35 are more likely to state lack of physical activity and healthy diet as a barrier to maintaining good cardiovascular health.**
- **Those between the ages of 45-64 are more likely to rate stress as a main barrier.**
- Individuals of the ages 25-34 are much more likely than those over 35 to find it difficult to find time for medical appointments

Lifestyle factors such as physical activity and healthy diet are considered the main barrier to cardiovascular health.

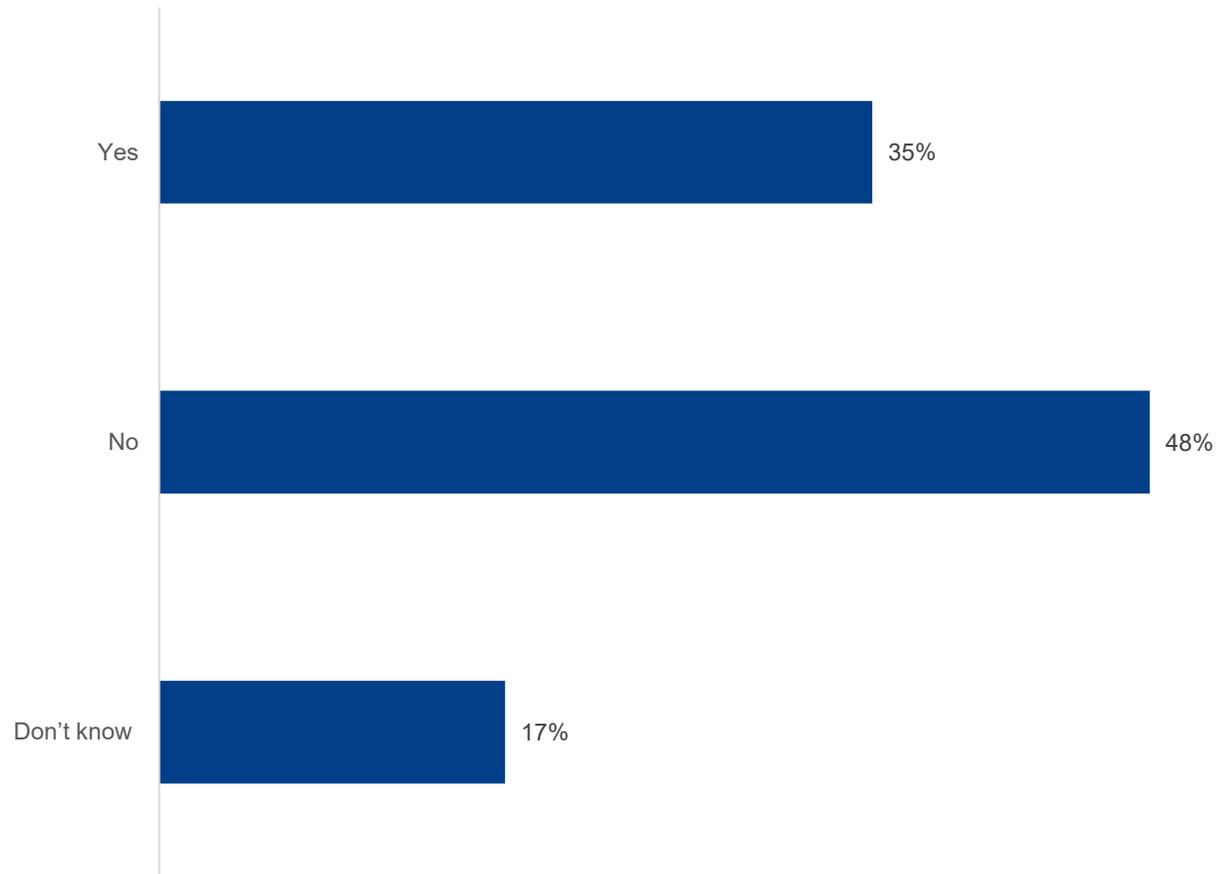
Q8. What are the main barriers to maintaining good cardiovascular health?



- In Germany, there is a larger barrier to finding time for medical appointments due to work/family responsibilities.
- In Portugal and Italy have more cost-related issues when trying to maintain good cardiovascular health.

Nearly 50% of public are unaware of gender-related differences in cardiovascular disease symptoms

Q9. Are you aware of any difference in symptoms in cardiovascular disease between men and women?

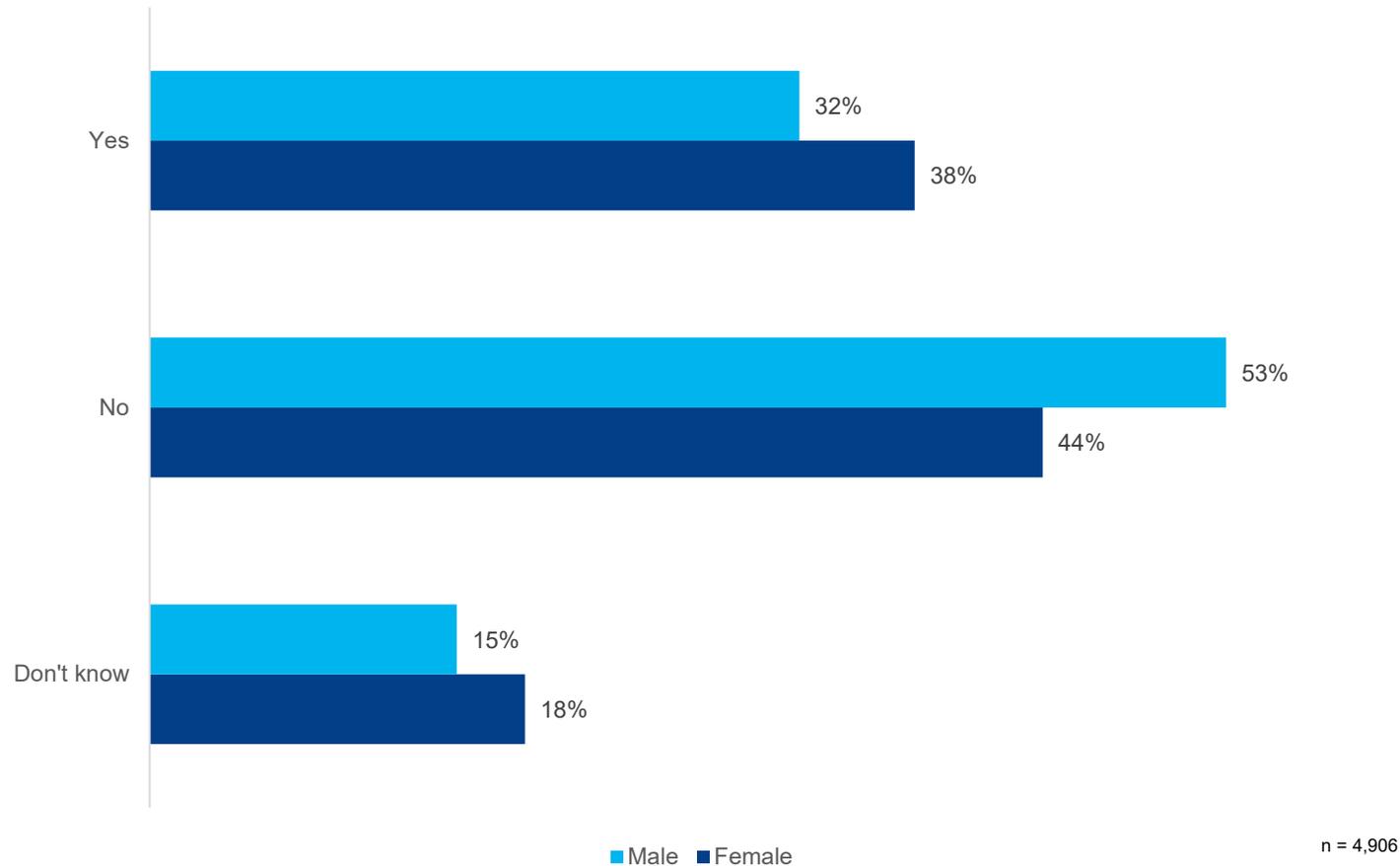


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- **35%** of respondents are aware of differences in cardiovascular disease symptoms between men and women.
- Nearly half (**48%**) said they are not aware of such differences.
- **17%** said they did not know.

Aware of gender differences in heart disease symptoms remains limited

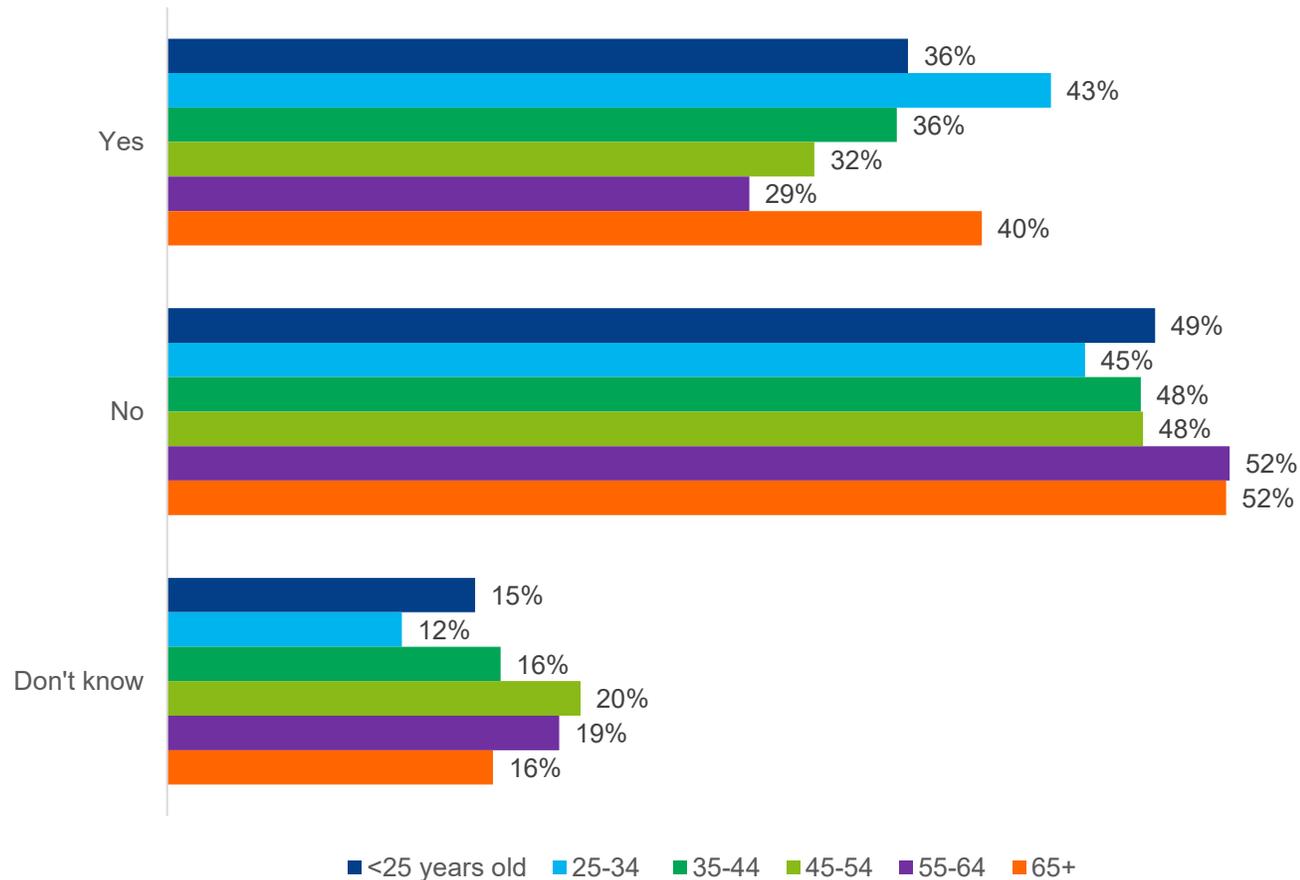
Q9. Are you aware of any difference in symptoms in cardiovascular disease between men and women?



- Only **32%** of men and **38%** of women recognise that symptoms differ between genders.
- A majority— **53%** of men and **44%** of women— **do not believe there's a difference.**
- Another **15%** of men and **18%** of women say they don't know whether symptoms vary.

Awareness of gender-specific heart disease symptoms peaks in young adults but remains low overall

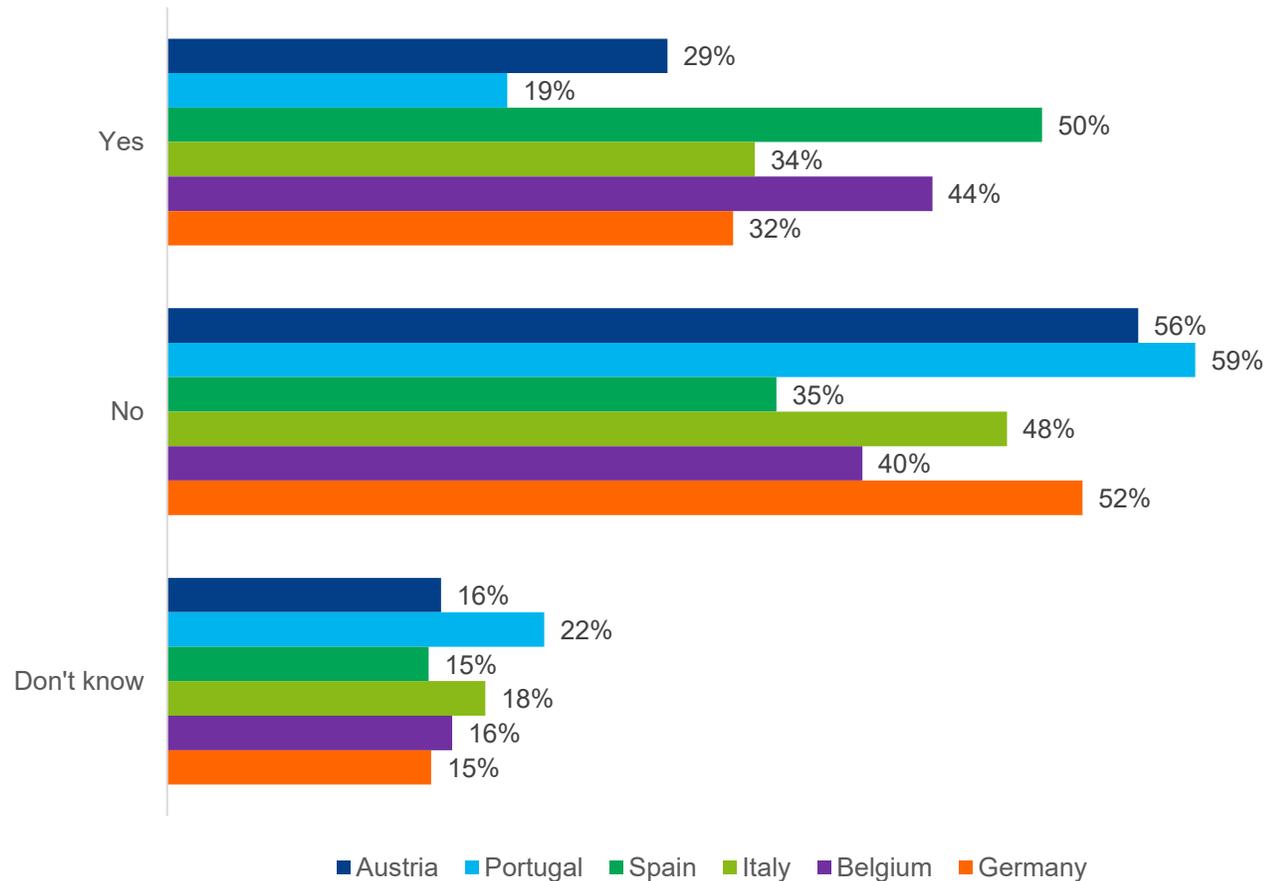
Q9. Are you aware of any difference in symptoms in cardiovascular disease between men and women?



- Highest recognition among 25–34-year-olds (**43%** say “yes”), compared with just **29%** in those aged 55–64.
- **In every age bracket over half report no difference (49–52% across 35+ groups).**
- “Don’t know” response rises with age, reaching **20%** in 45–54 and **19%** in 55–64 cohorts.

Half of the general public in Spain are aware of differences in symptoms between men and women in cardiovascular disease

Q9. Are you aware of any difference in symptoms in cardiovascular disease between men and women?

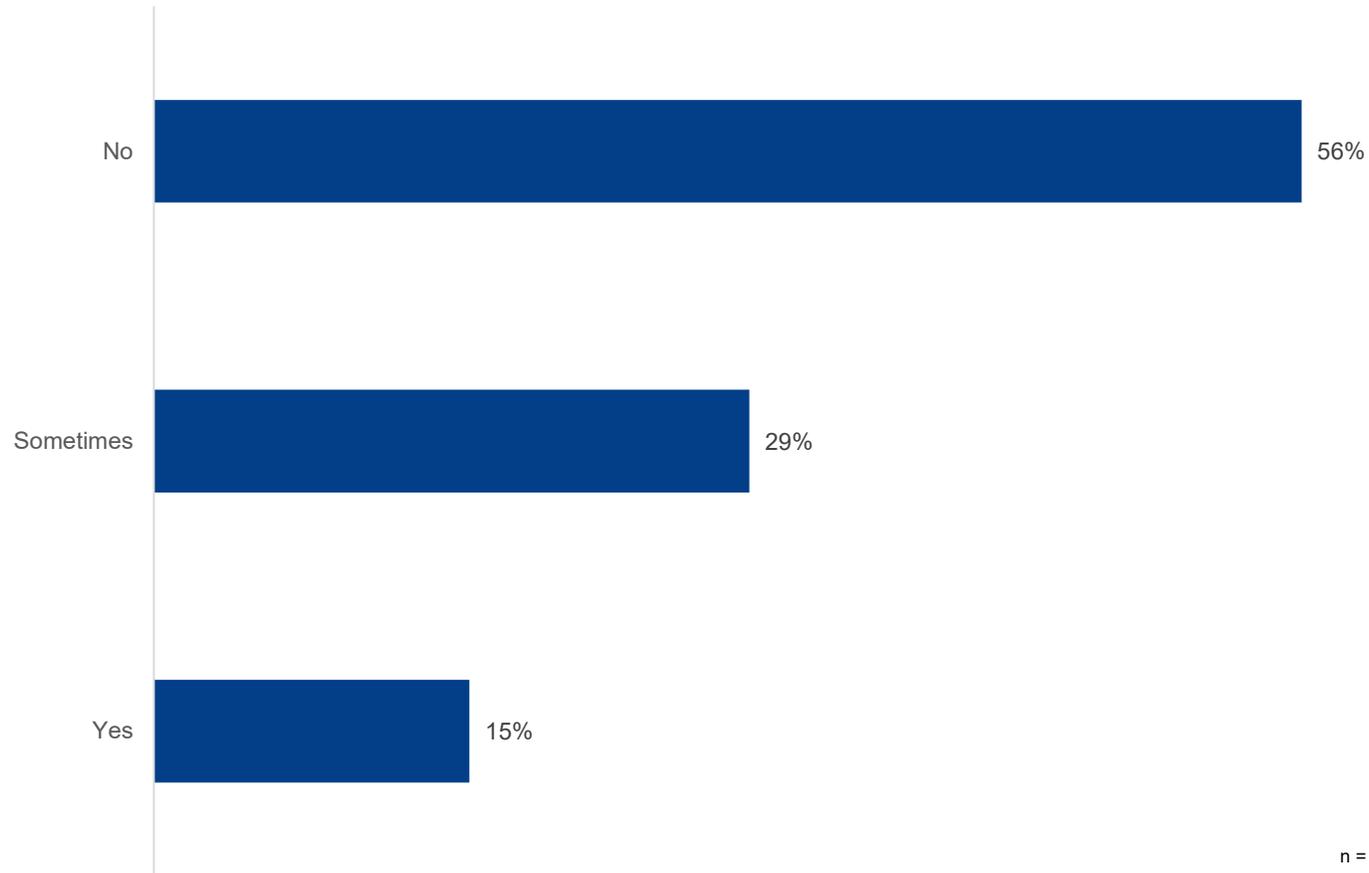


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- **In Spain**, the general public are the most aware of differences in symptoms in cardiovascular disease between men and women.
- Where as, **people in Portugal and Austria are the least aware.**

1 in 4 respondents feel uncomfortable talking with friends, family or colleagues about their cardiovascular health

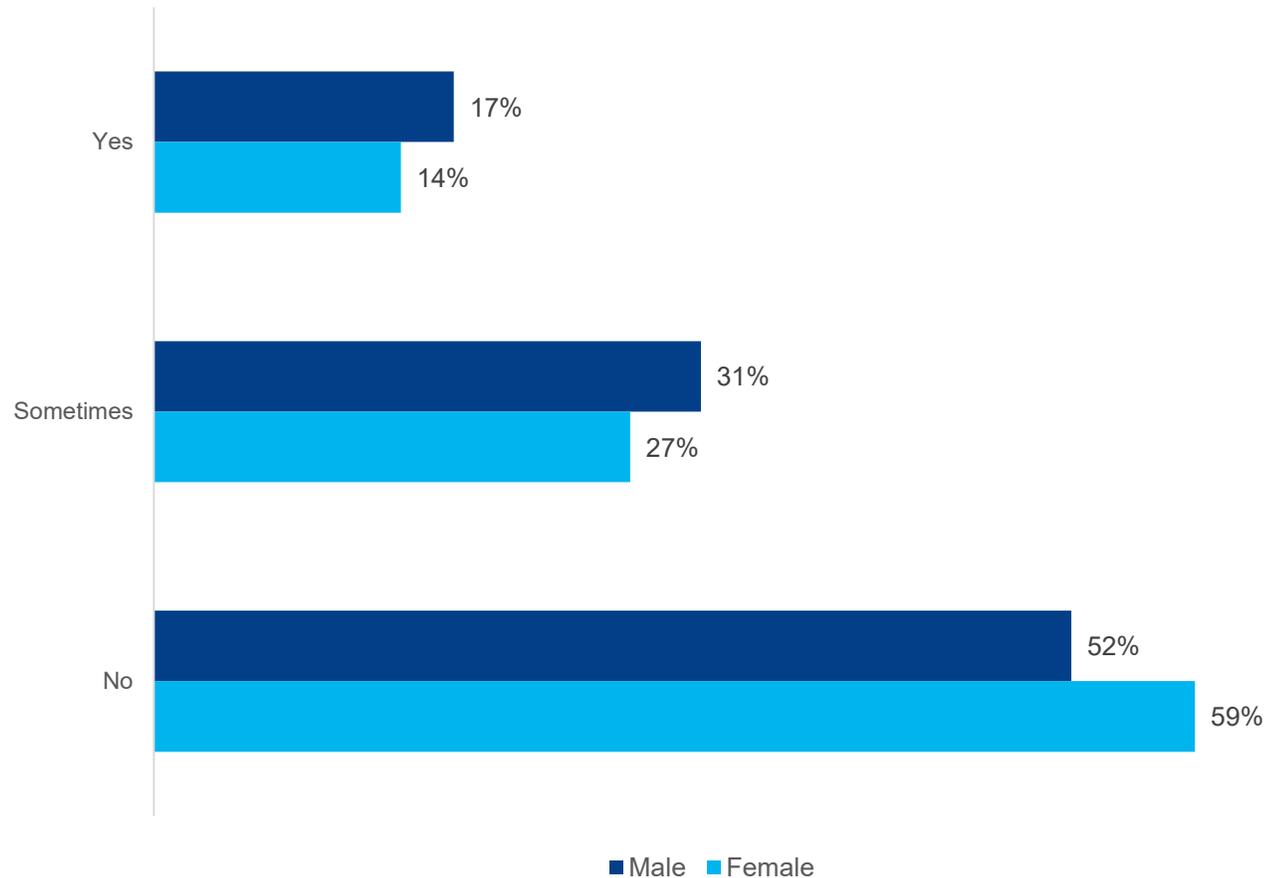
Q10. Do you avoid/feel put off speaking to friends, family or colleagues about your cardiovascular health?



- **More than half of respondents (56%)** say they do not avoid discussing their cardiovascular health with others.
- About **one in three** say they sometimes feel uncomfortable talking about the topic.
- **A smaller but significant proportion (15%)** consistently avoid talking about their heart health.

Men are more likely than women to sometimes avoid discussing their cardiovascular health

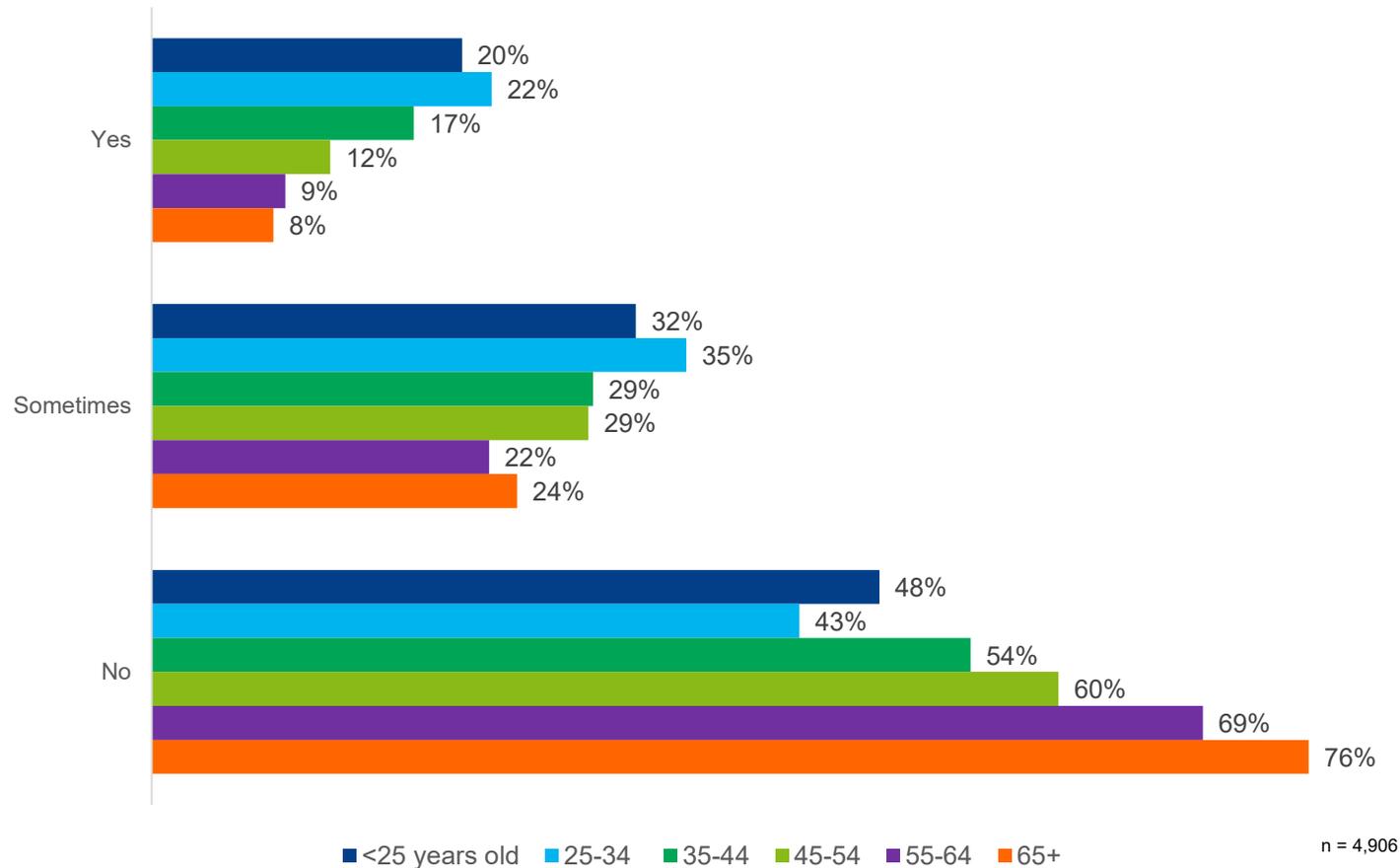
Q10. Do you avoid/feel put off speaking to friends, family or colleagues about your cardiovascular health?



- A majority do not feel put off talking about heart health (52% of men; 59% of women).
- Sometimes avoiding discussion is reported by 31% of men and 27% of women.
- Regular avoidance affects 17% of men versus 14% of women.

Older adults far less likely to avoid discussing their cardiovascular health than younger people

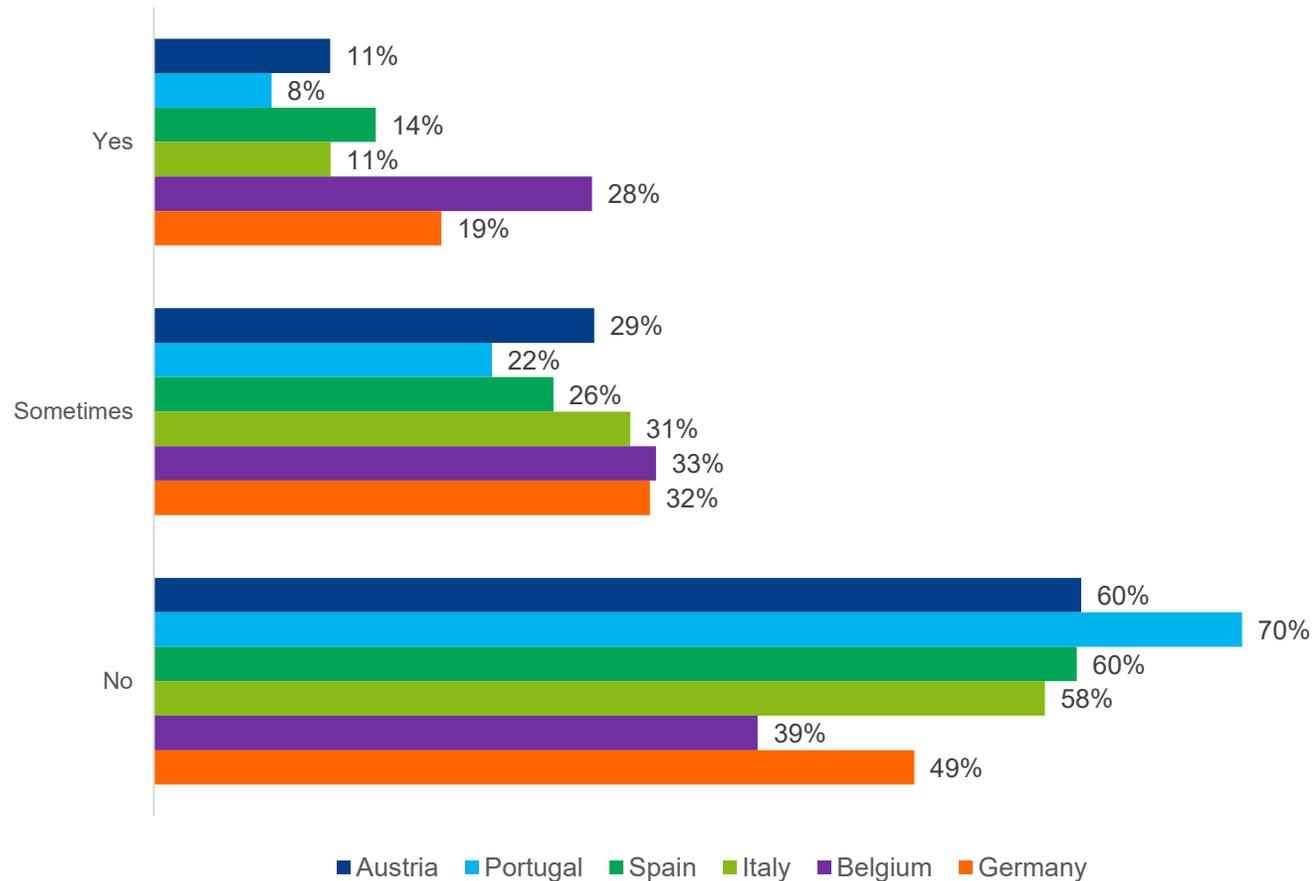
Q10. Do you avoid/feel put off speaking to friends, family or colleagues about your cardiovascular health?



- The **share saying no rises steadily with age**, from **48%** (<25) to **76%** (65+).
- Sometimes avoiding peaks around 25–34 and 35–44 (**35%** and **32%**), then declines to **24–29%** in older groups.
- Regular “yes” avoidance is highest among under 25s (**20%**) and falls to just **8%** by age 65+.

Almost a third of the general public in Belgium avoid speaking with friends, family or colleagues about their cardiovascular health

Q10. Do you avoid/feel put off speaking to friends, family or colleagues about your cardiovascular health?

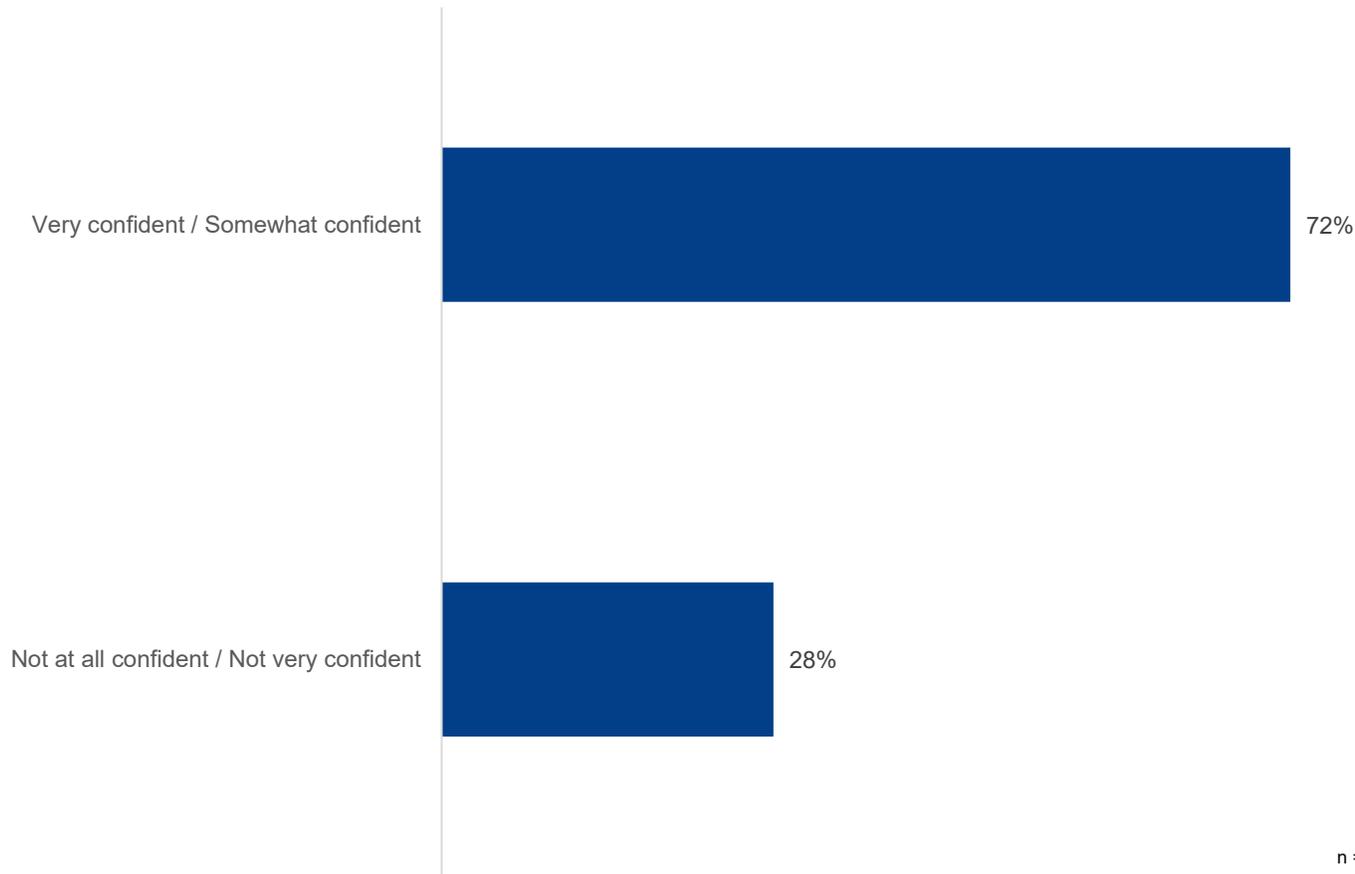


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- In Belgium, people are most likely to avoid speaking to friends, family or colleague about their cardiovascular health.
- In Portugal, people are least likely to avoid speaking to friends, family or colleague about their cardiovascular health.

1 in 4 respondents do not feel confident in their ability to manage their cardiovascular health

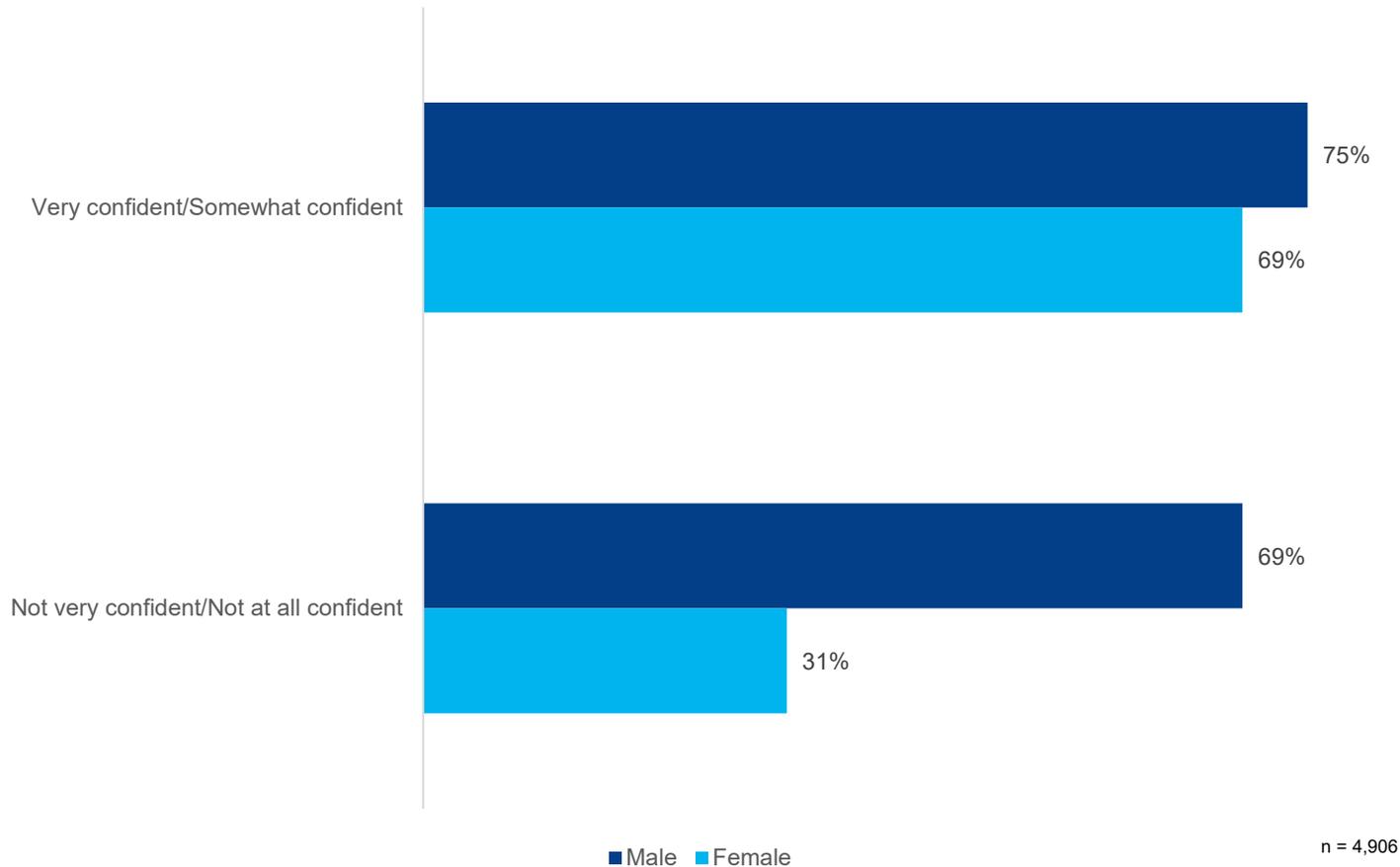
Q11. Do you feel confident in your ability to manage your cardiovascular health?



- **72%** of respondents said they were **very or somewhat confident** in their ability to manage their cardiovascular health.
- **28%** said they were **not at all or not very confident** in their ability to manage their cardiovascular health.

Men feel significantly less confident at managing their cardiovascular health

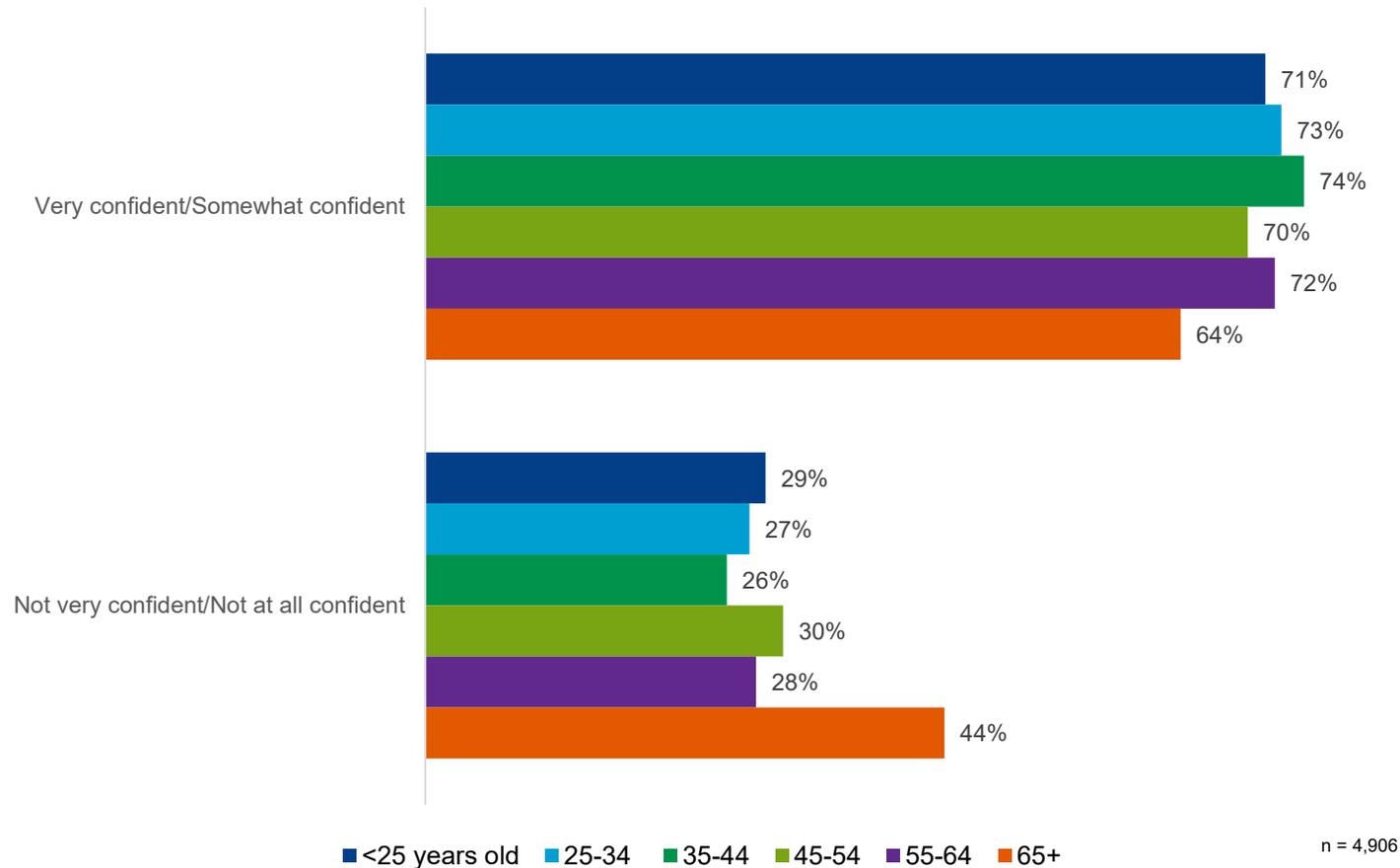
Q11. Do you feel confident in your ability to manage your cardiovascular health?



- **Men** contribute to **69%** of those that are **not confident** at managing their cardiovascular health.

Older adults report lower confidence in managing their cardiovascular health

Q11. Do you feel confident in your ability to manage your cardiovascular health?

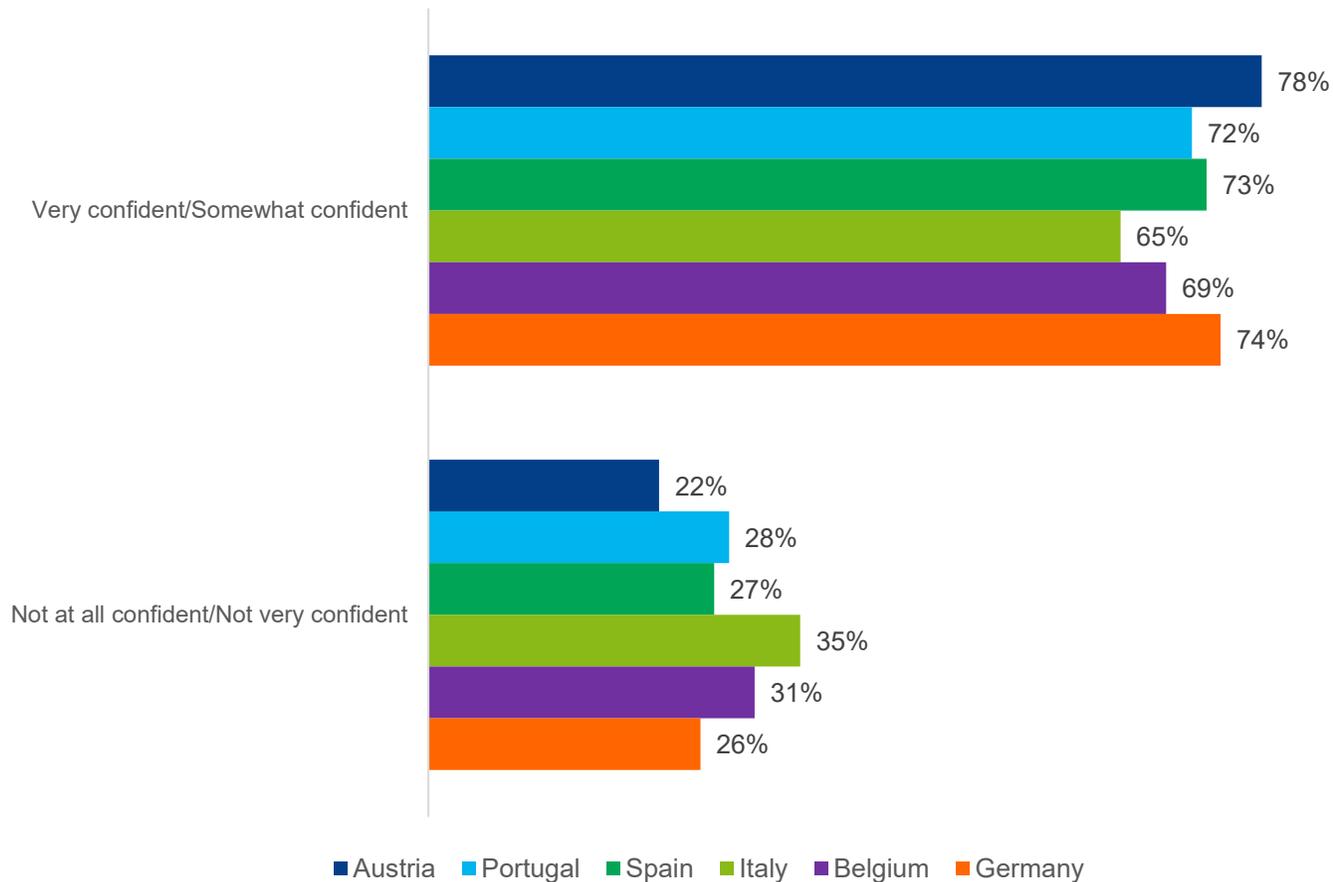


- Overall, about **72%** feel **very or somewhat confident** in managing their cardiovascular health.
- **Confidence peaks in the 35–44 age group (74%)** and dips for those 65+ (**64%**).
- **The 65+ cohort also has the highest share who feel not very or not at all confident (44%),** compared to **28–30%** in younger groups.

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Between countries there is a similar confidence in ability to manage cardiovascular health

Q11. Do you feel confident in your ability to manage your cardiovascular health?

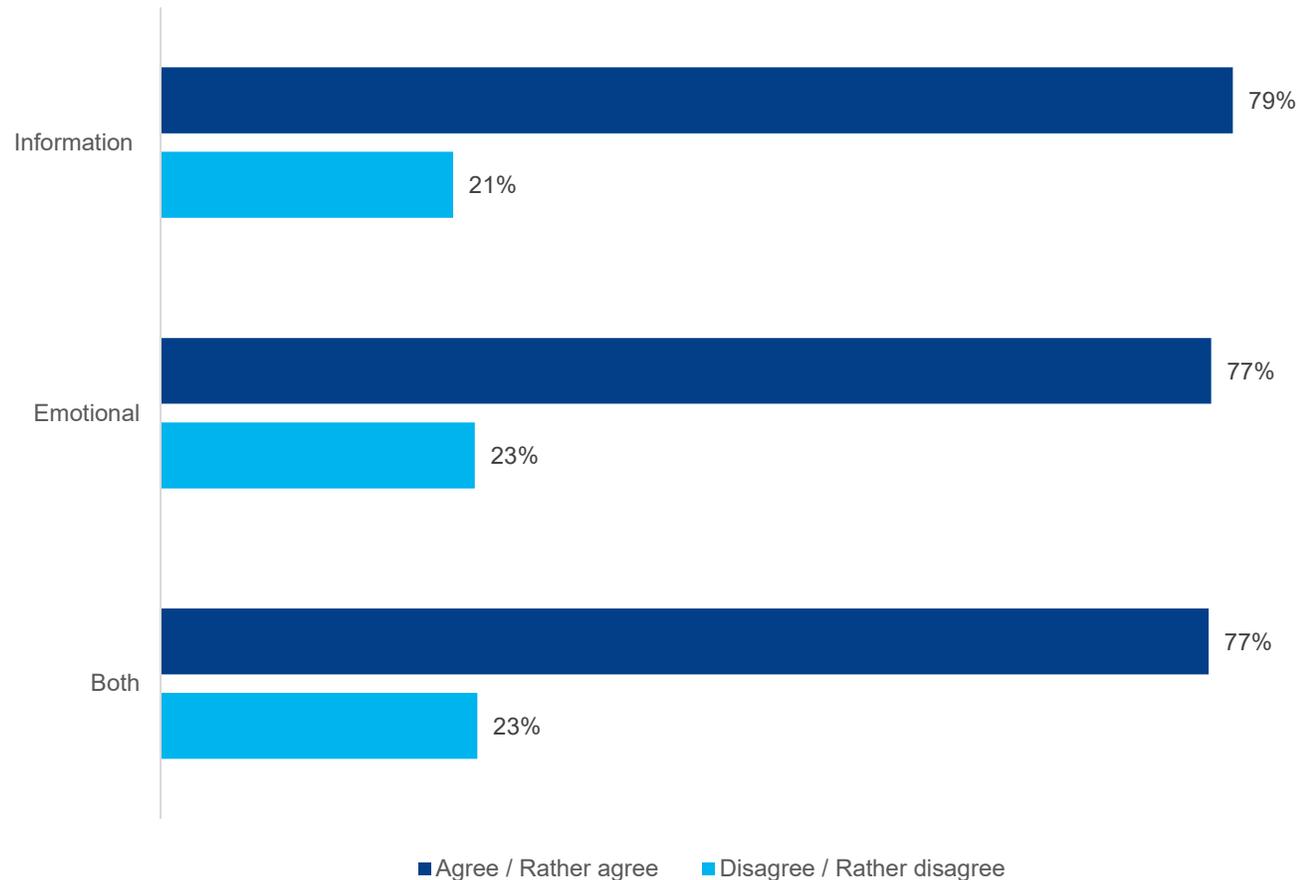


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- There is little difference between most countries in their confidence to manage their cardiovascular health.
- **Italians appear to be the least confident in their ability to manage their cardiovascular health.**

1 in 5 respondents feel lack of support to care for their cardiovascular health

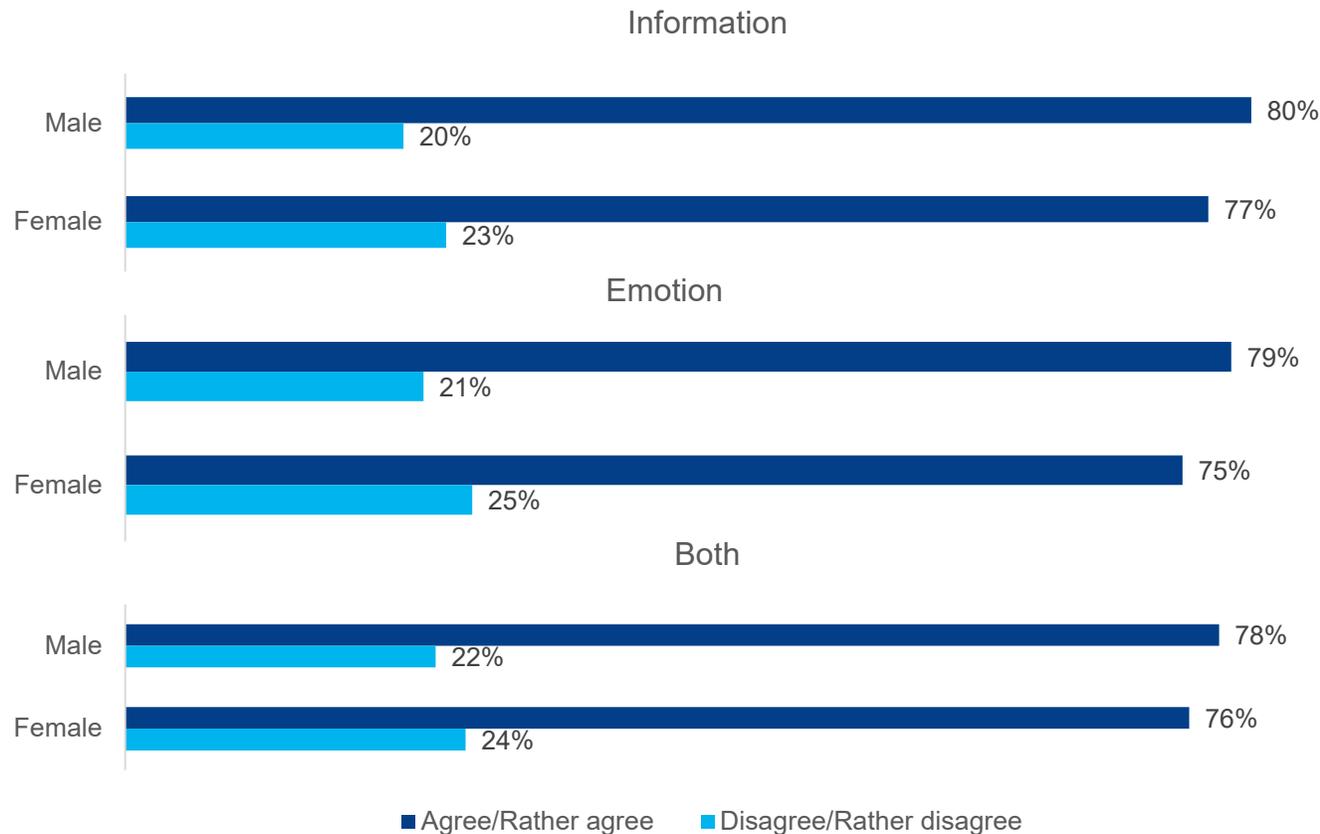
Q13. How much do you agree with the following statement: I have enough support (emotional and/or information) to care for my cardiovascular health.



- **79%** agree or rather agree that they have enough information about their cardiovascular health. **One in five disagree or rather disagree.**
- **77%** agree or rather agree that they have adequate support for their cardiovascular health. **23%** disagree or rather disagree.
- When emotional and informational support are combined, agreement remains high at **77%**, with **23%** disagreeing.

Most feel they have adequate support, with men slightly more positive than women

Q13. How much do you agree with the following statement: I have enough support (emotional and/or information) to care for my cardiovascular health.

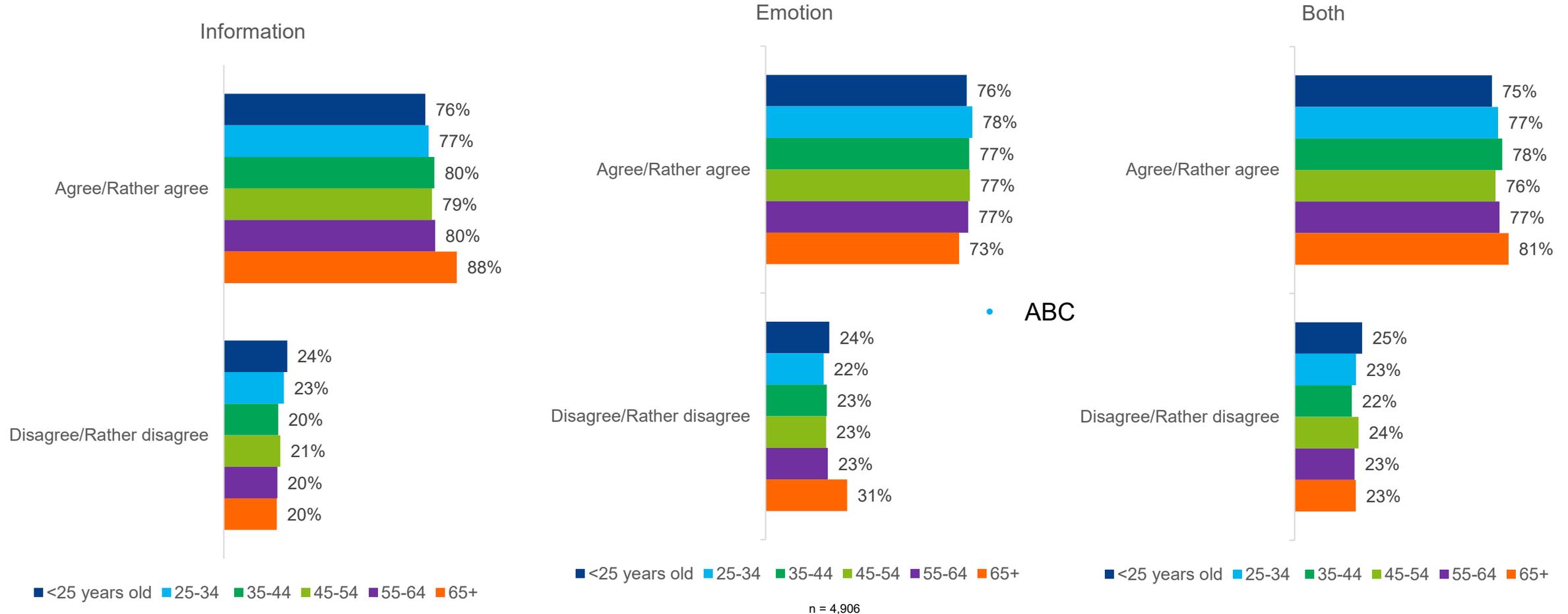


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- Around **77–80%** of respondents agree they have enough informational support, with **80%** of men versus **77%** of women.
- Approximately **75–79%** feel they receive sufficient emotional support (**79%** men; **75%** women).
- When combining both types of support, **78%** of men and **76%** of women report feeling adequately supported.

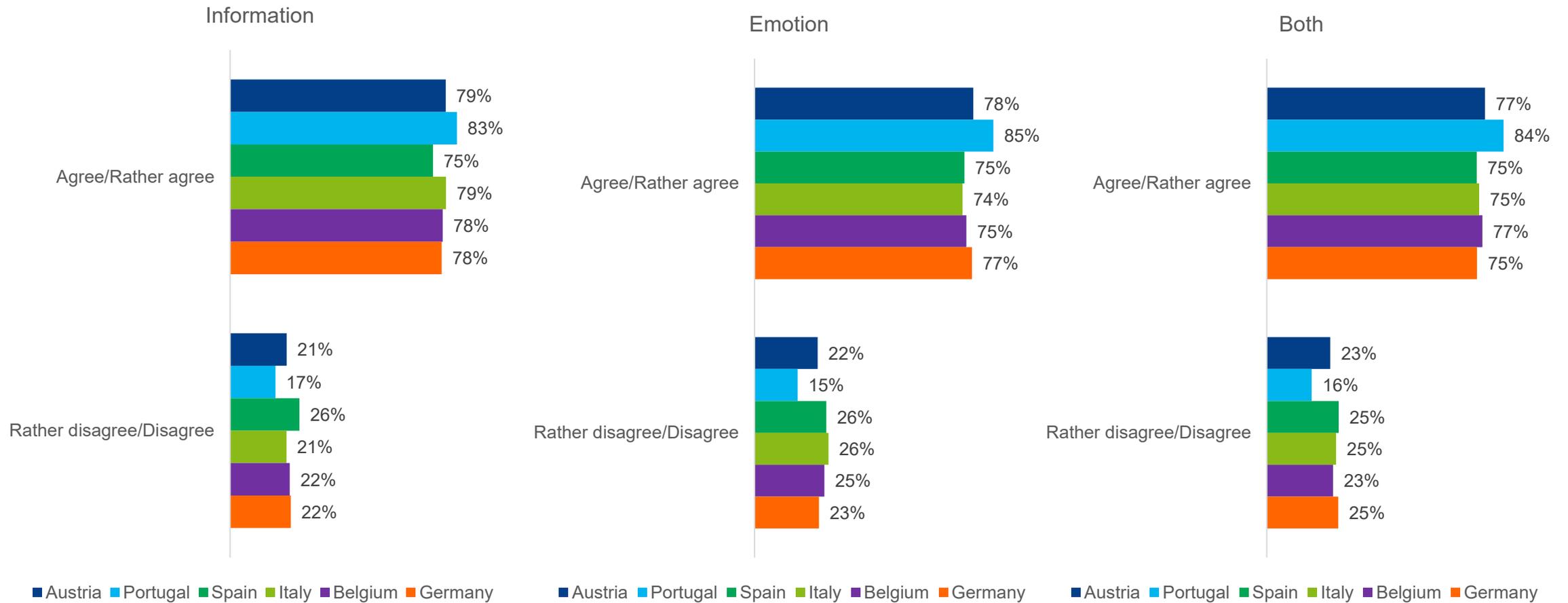
Most age groups feel supported to care for their cardiovascular health, with those 65+ reporting the highest levels of agreement

Q13. How much do you agree with the following statement: I have enough support (emotional and/or information) to care for my cardiovascular health.



Those in Portugal report to have the most support/information to care for their cardiovascular health

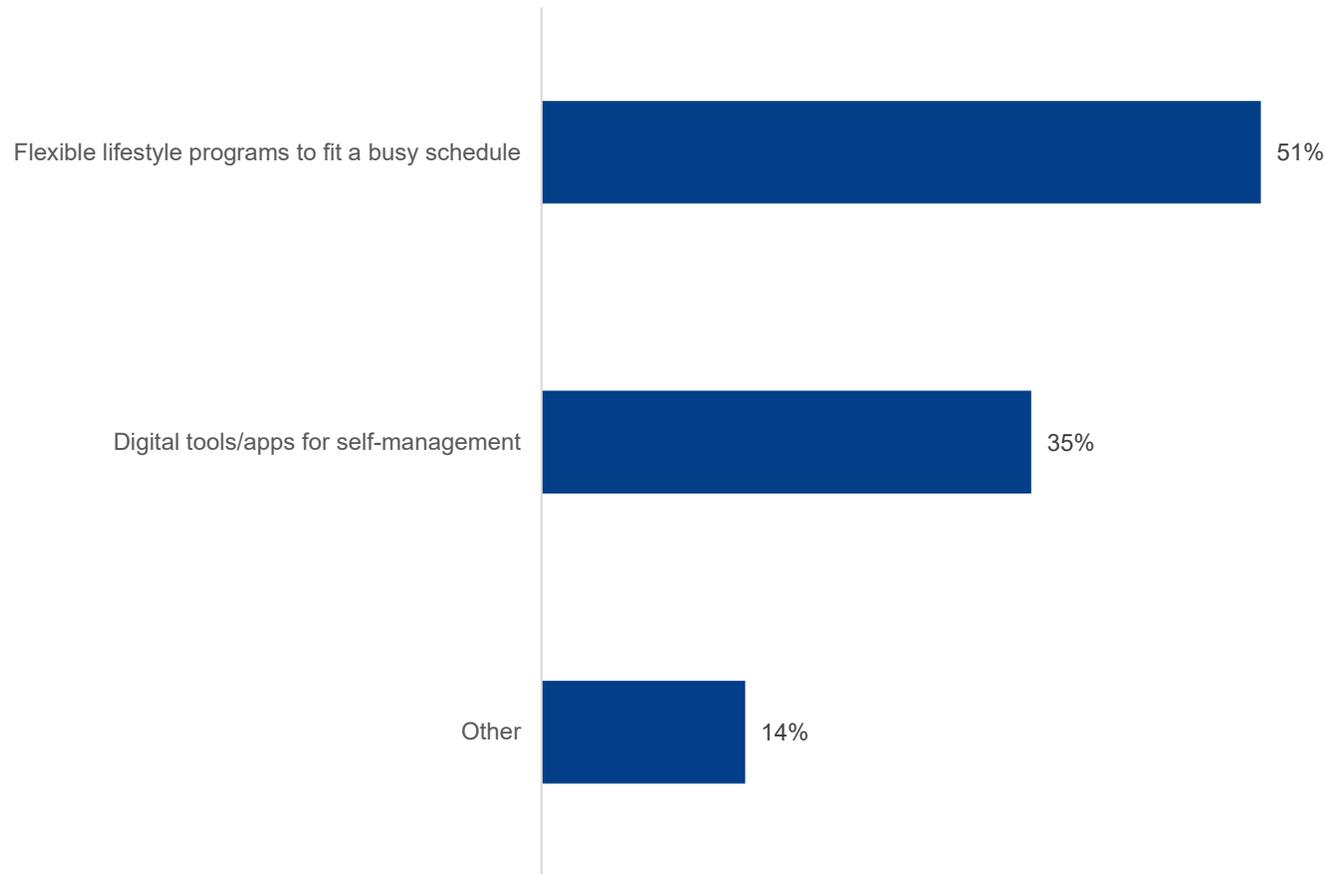
Q13. How much do you agree with the following statement: I have enough support (emotional and/or information) to care for my cardiovascular health.



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The general public sees the highest benefit in flexible lifestyle programs to accommodate busy schedules in supporting their cardiovascular health

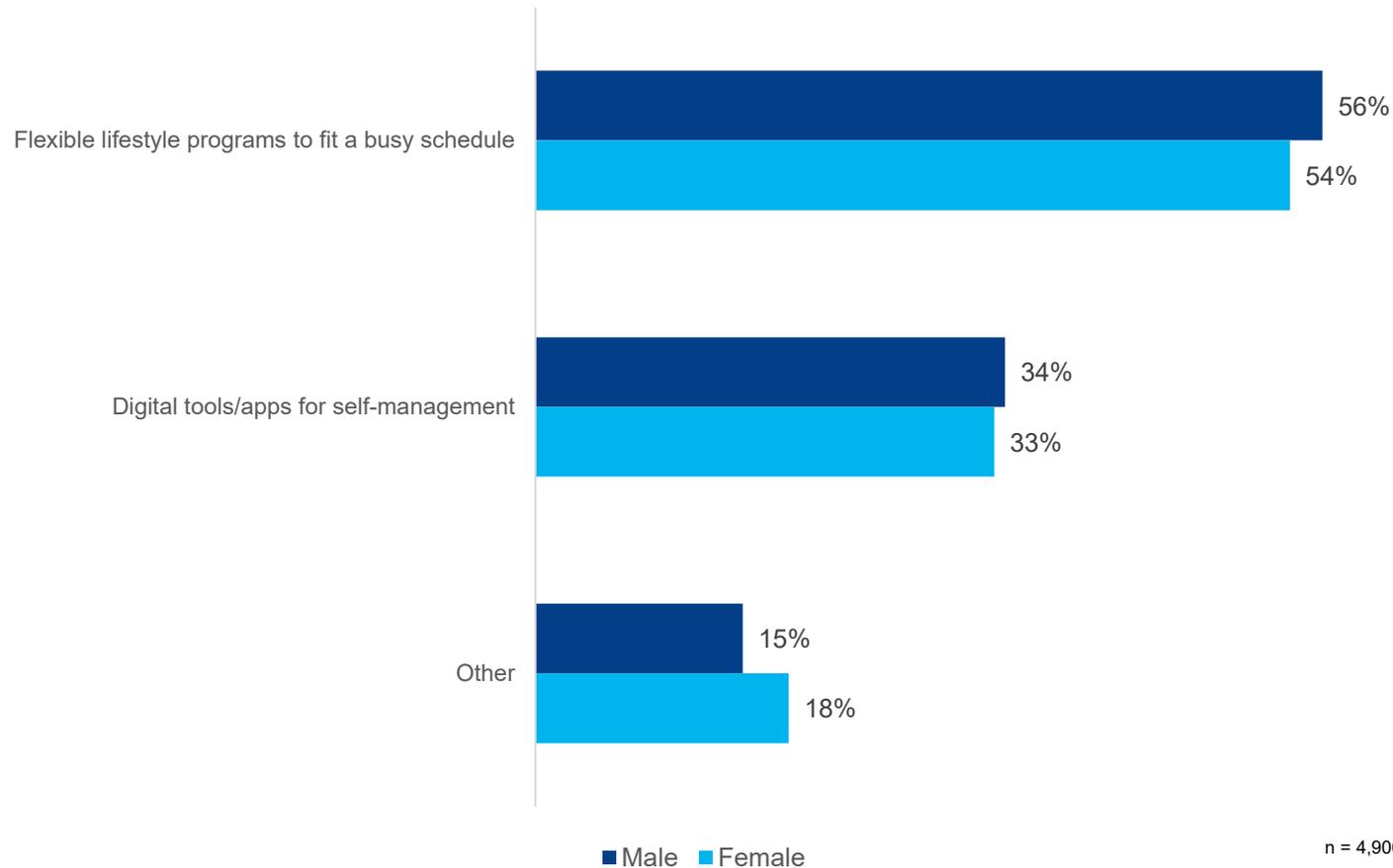
Q13. What do you believe would be helpful?



- **More than half of respondents** favor flexible lifestyle programs designed to accommodate busy schedules to support their cardiovascular health.
- **35%** cite digital tools or apps as a beneficial self-management option.
- A smaller proportion (**14%**) suggest other approaches without defining them more into detail.

Flexible lifestyle programs are the top support priority for those lacking support

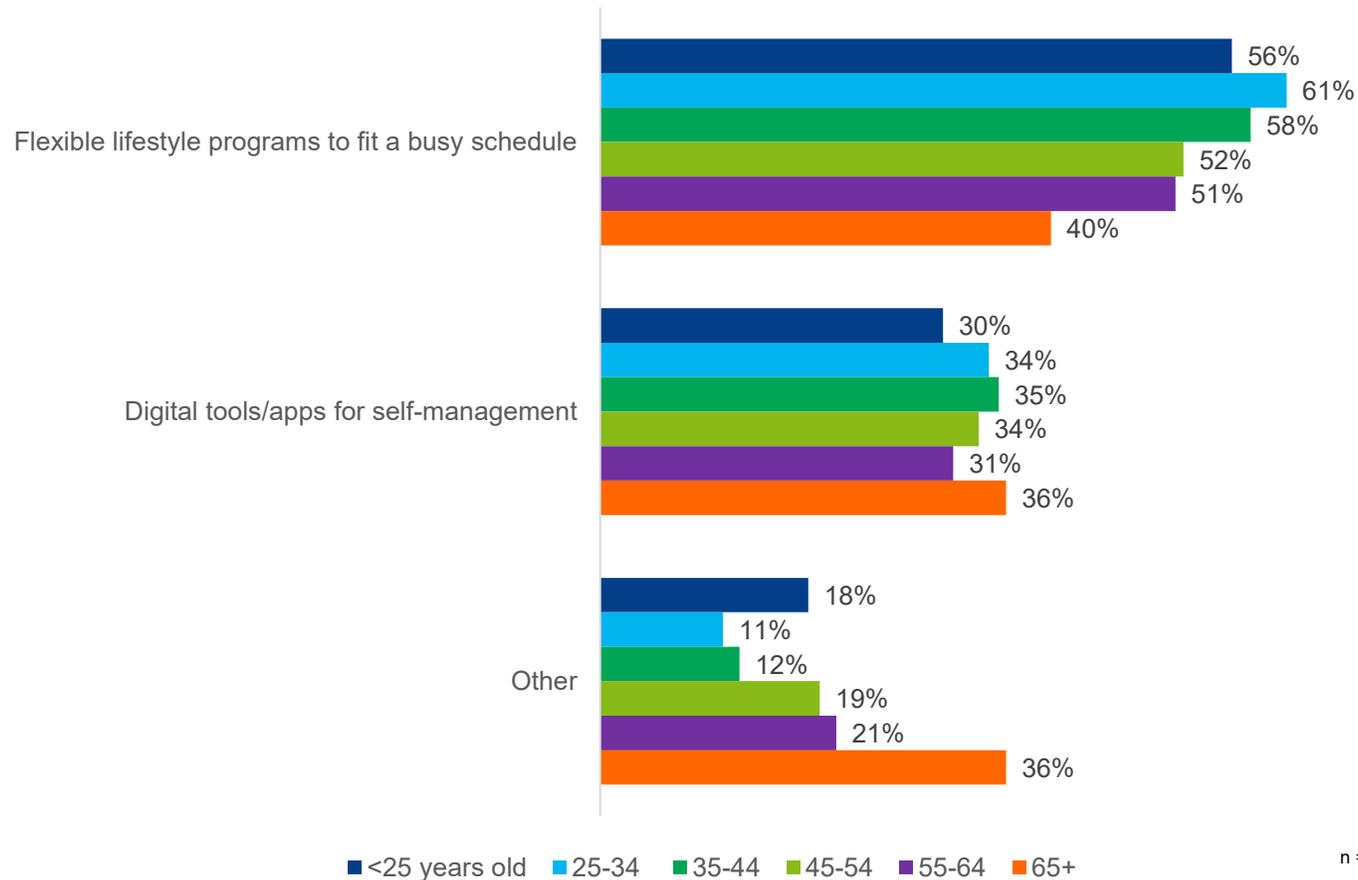
Q13. What do you believe would be helpful?



- **56%** of men and **54%** of women say **flexible lifestyle programs would be most helpful.**
- Digital tools or apps for self-management rank second (**34%** men, **33%** women).
- Only **15%** of men and **18%** of women selected other options.

Flexible programs top the wish list across all age groups

Q13. What do you believe would be helpful?

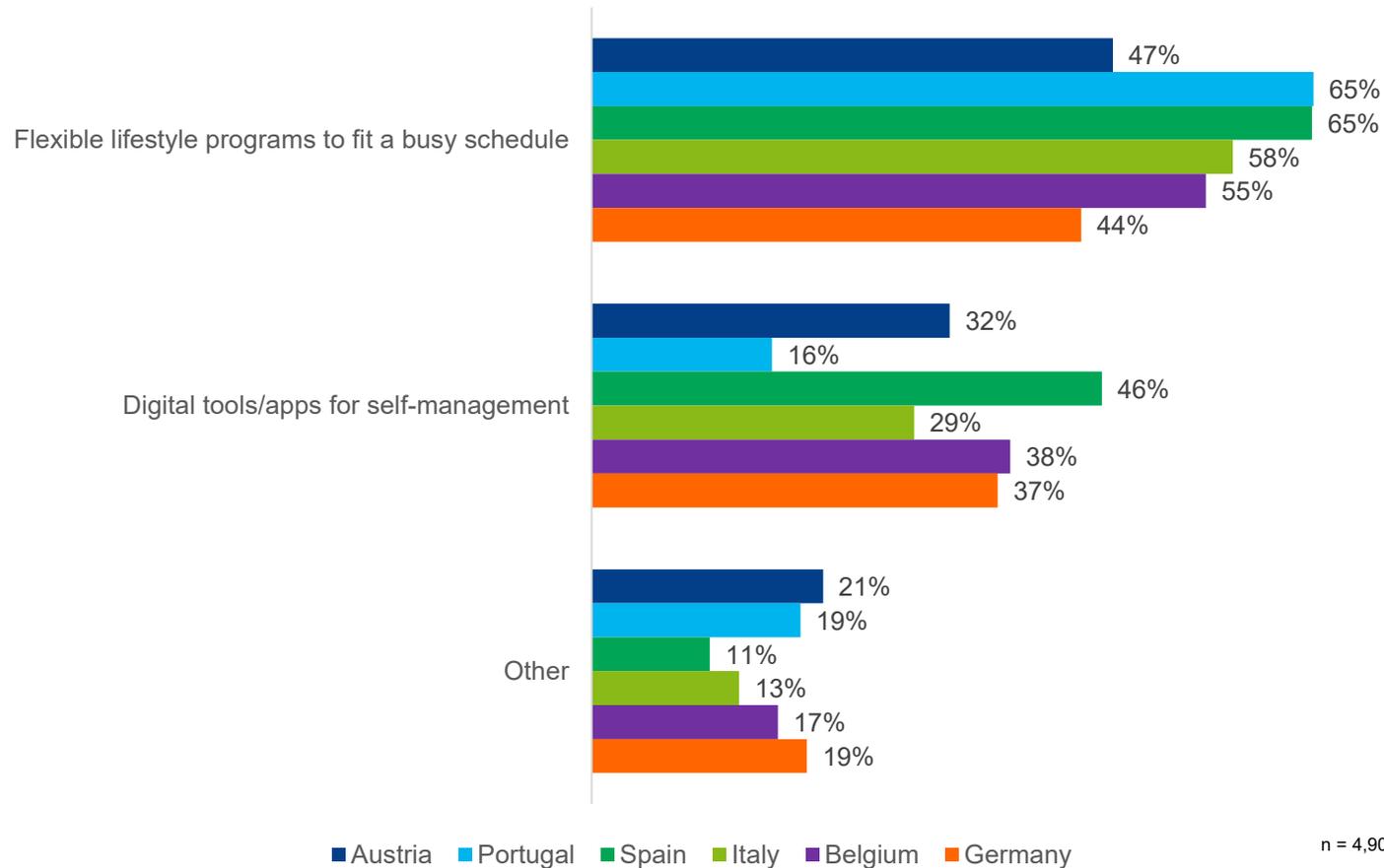


- **56%** of under-25s to **61%** of 25–34-year-olds favour flexible lifestyle programs, **with uptake dipping to 40% among those 65+.**
- Digital self-management tools appeal to **roughly one-third of each cohort (30%–36%).**

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Digital tools are less favorable as a helpful tool to manage cardiovascular health, particularly in Portugal

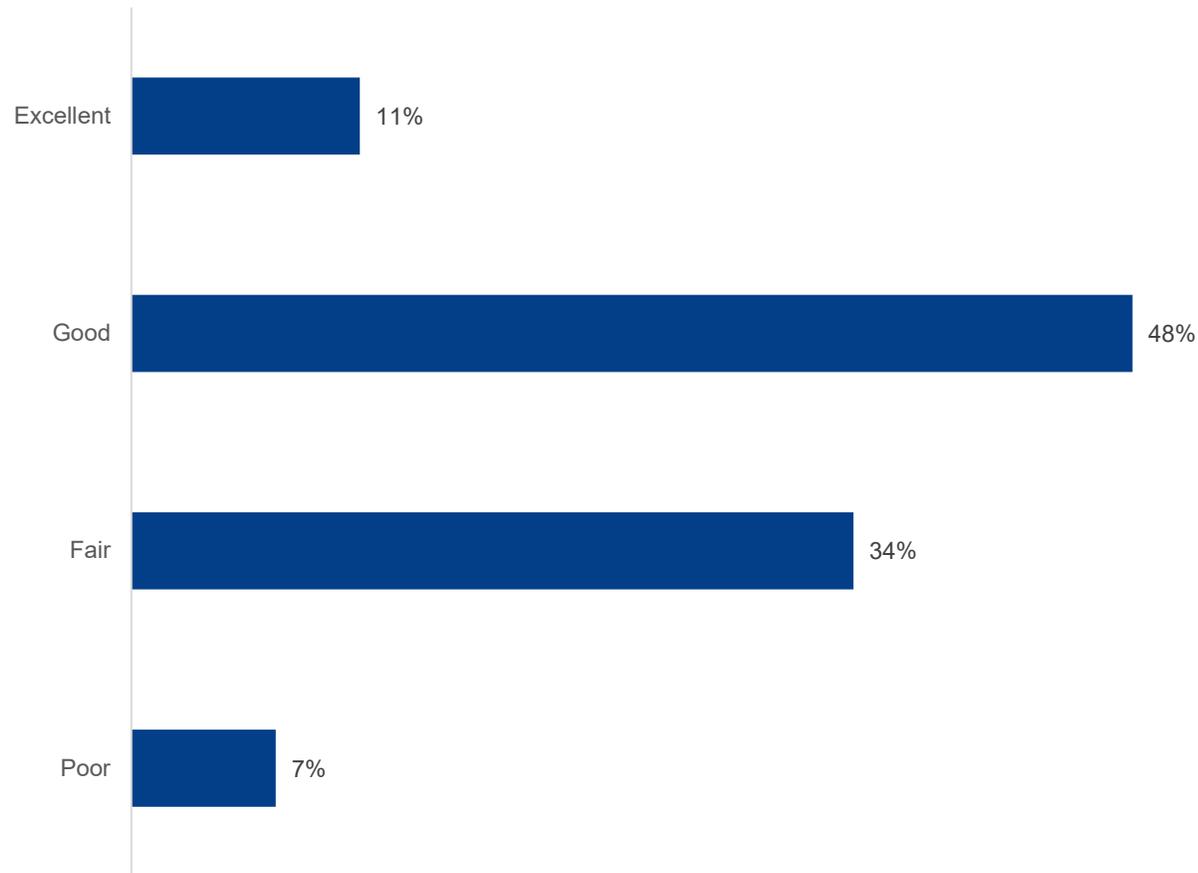
Q13. What do you believe would be helpful?



- Out of all the countries, **Spain is most in favor of utilising digital tools for self management of cardiovascular health.** Where as, Portugal are not in favor of them.
- Germany and Austria are least likely to think flexible lifestyle programs are helpful.

More than 90% rate their understanding of cardiovascular risks as at least fair

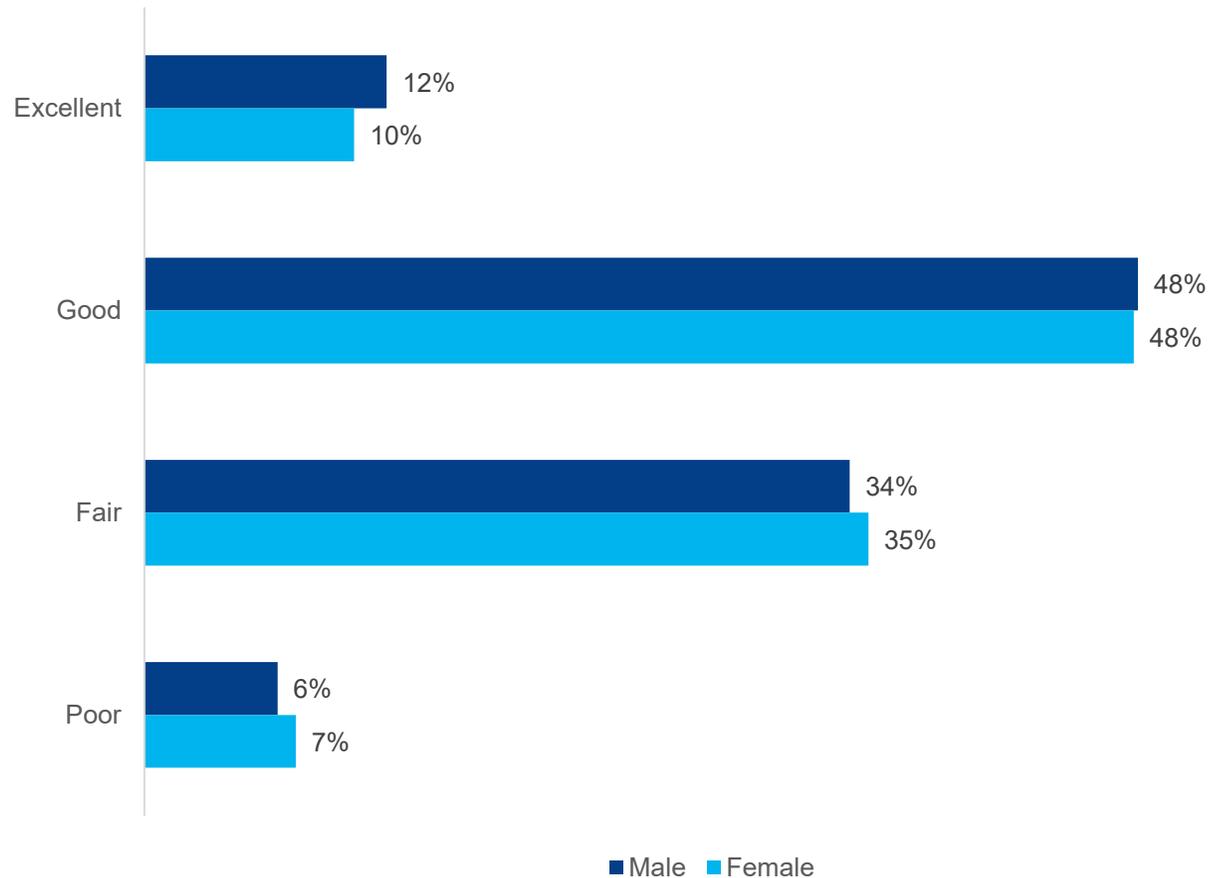
Q14. How would you rate your level of understanding of cardiovascular disease, its symptoms and your own personal risk?



- About **one in ten** say their understanding of cardiovascular disease is excellent.
- **Nearly half** of all respondents rate their understanding as good.
- **More than a third rate** their understanding as fair.
- A small proportion (**7%**) say their understanding is poor.

Men and women rate their understanding of cardiovascular disease similarly

Q14. How would you rate your level of understanding of cardiovascular disease, its symptoms and your own personal risk?

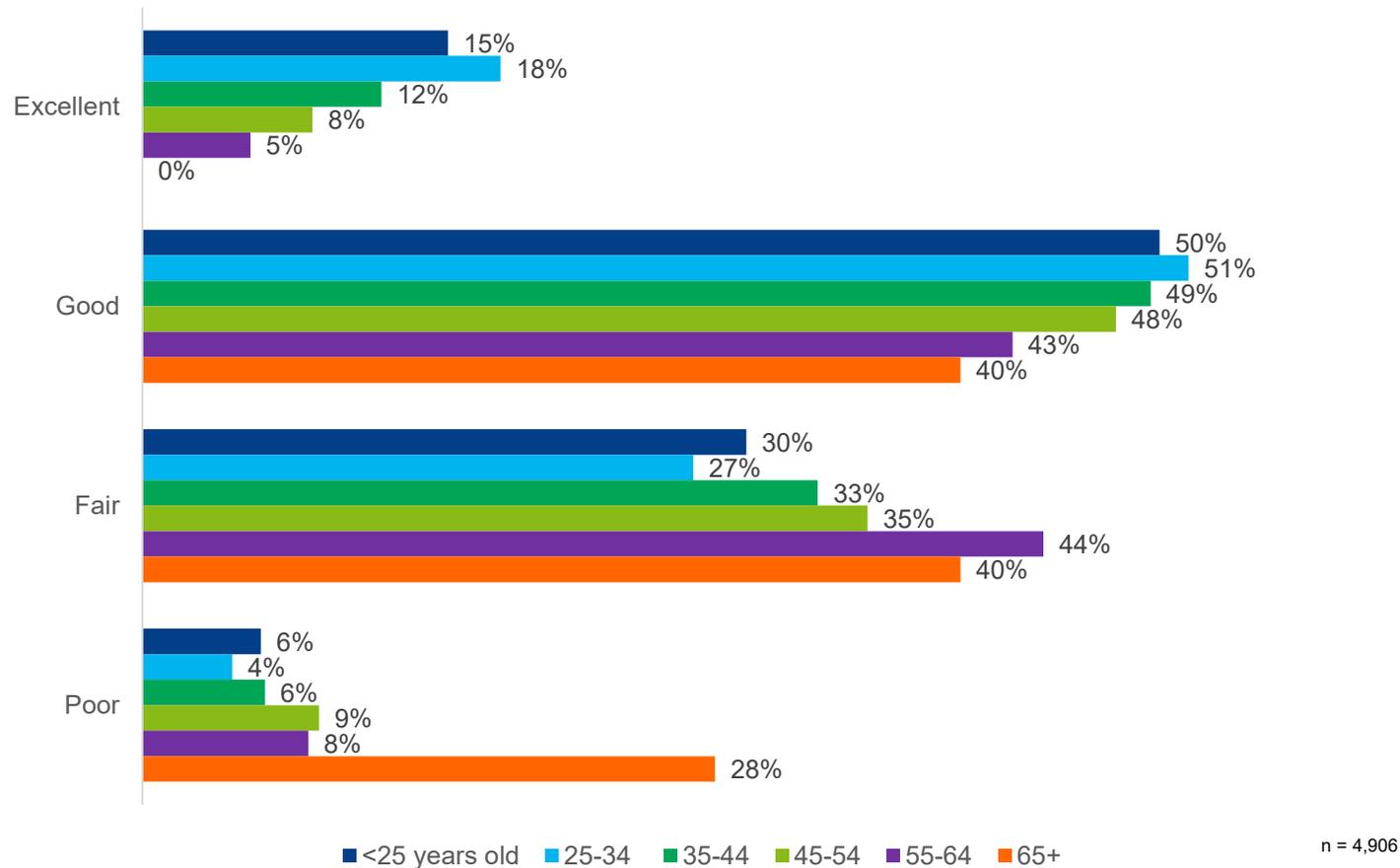


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- There is no significant difference between male and female understanding of cardiovascular disease.

Most age groups rate their understanding of cardiovascular disease as “good”

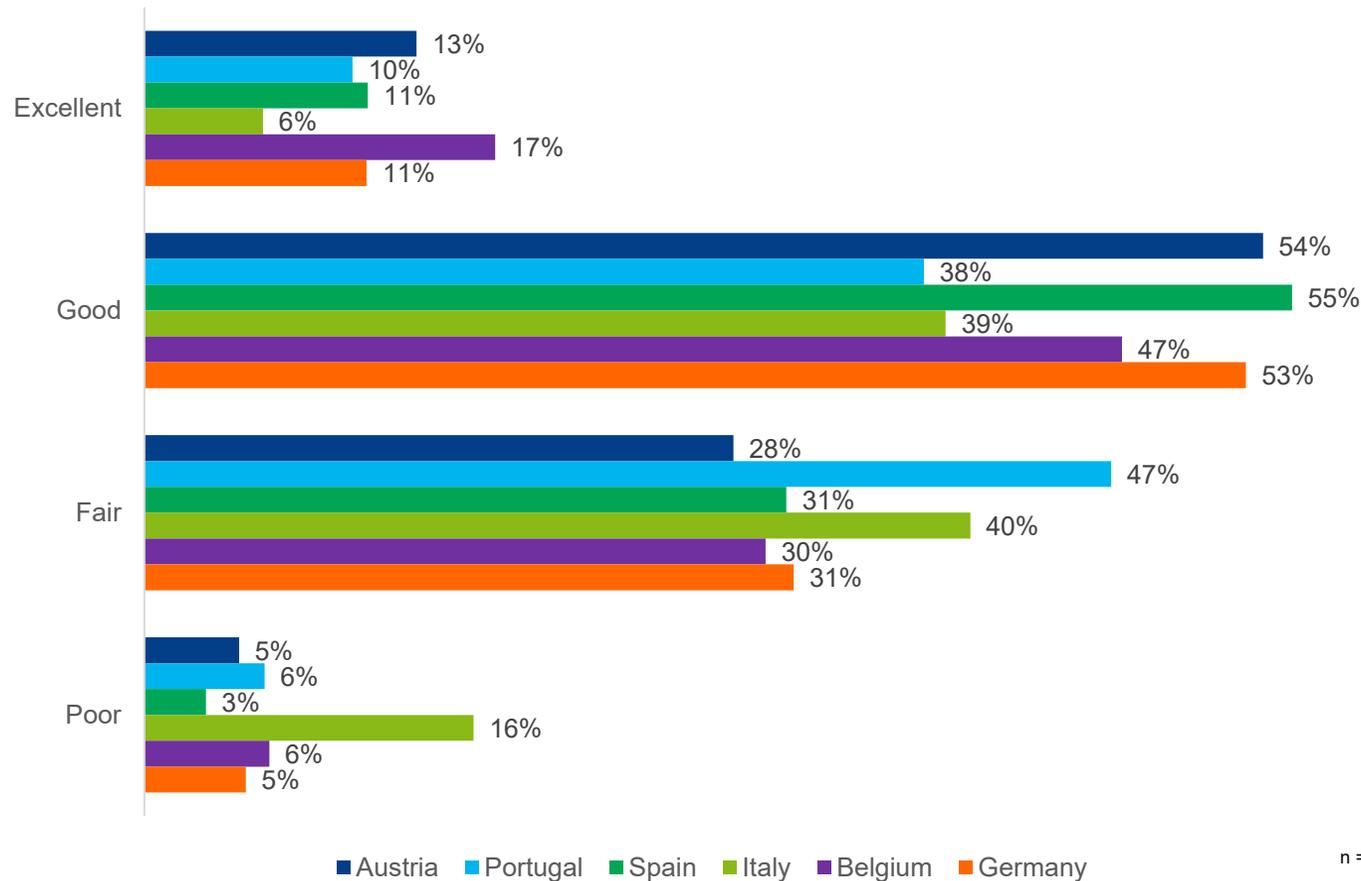
Q14. How would you rate your level of understanding of cardiovascular disease, its symptoms and your own personal risk?



- **Around half of respondents across cohorts (49%–51%) selected “good”,** with the peak at **51%** among 25–34-year-olds.
- **“Fair” understanding rises with age,** from **27%** of 25–34s **to 44%** of those 65+.
- Only a small minority consider their knowledge “excellent” (**8%–18%**), while “poor” ratings jump to **28%** among the oldest group.

Over 60% of people in Germany, Belgium, Spain and Austria rate their understanding of cardiovascular disease as good or excellent

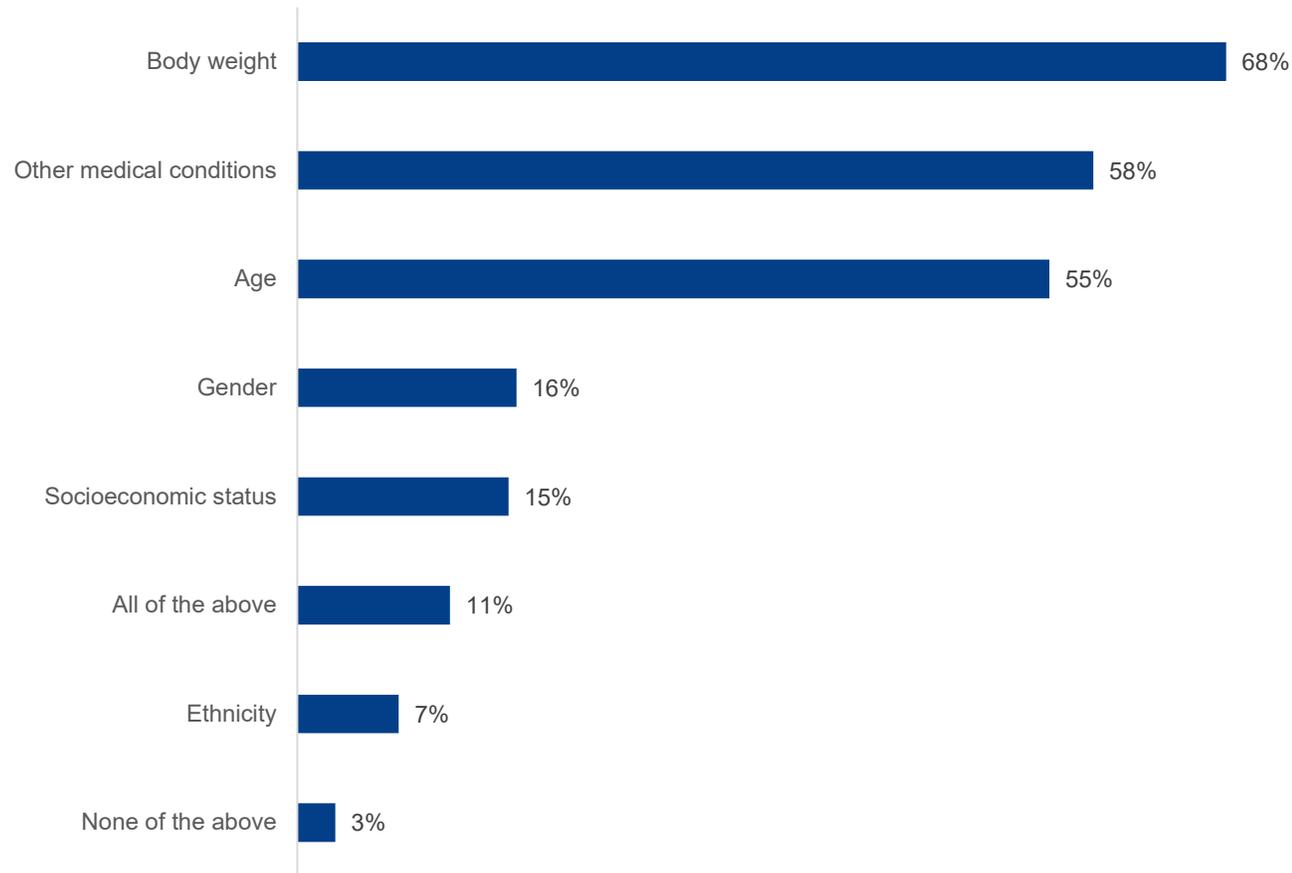
Q14. How would you rate your level of understanding of cardiovascular disease, its symptoms and your own personal risk?



- Italy has the lowest rating of understanding of cardiovascular disease, its symptoms and personal risk.
- Germany, Spain, Belgium and Austria have the highest proportion of people rating their understanding as good or excellent.

Body weight, other medical conditions, and age are the top three cardiovascular disease risk factors perceived by the general public

Q15. Which factors do you think contribute most to someone's risk of developing cardiovascular disease? Please select all that apply.

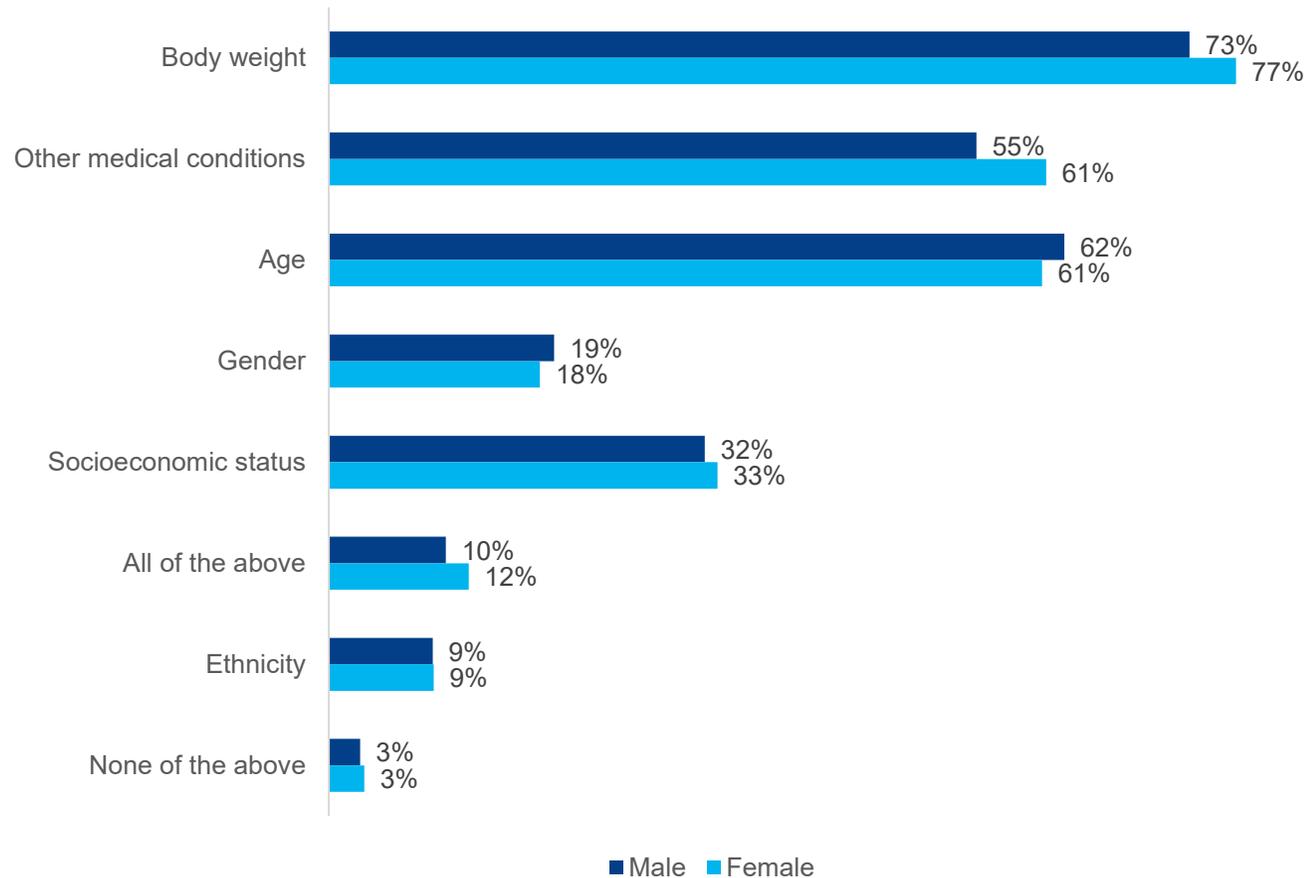


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- **Body weight stands out as the top perceived risk factor**, cited by **two in three**.
- Other medical conditions follow closely, more than half citing them.
- Age is considered a substantial risk factor by **55%**.
- Gender is considered a substantial risk factor by **16%**, while the socioeconomic status is assessed as risk factor by **15%**.
- **One in ten** sees all of the listed factors as cardiovascular risks.
- **7%** see ethnicity as a risk factor, while **3%** do not see any of the listed factors as risks.

Body weight and age are perceived as most risky factors for developing cardiovascular disease

Q15. Which factors do you think contribute most to someone's risk of developing cardiovascular disease? Please select all that apply.

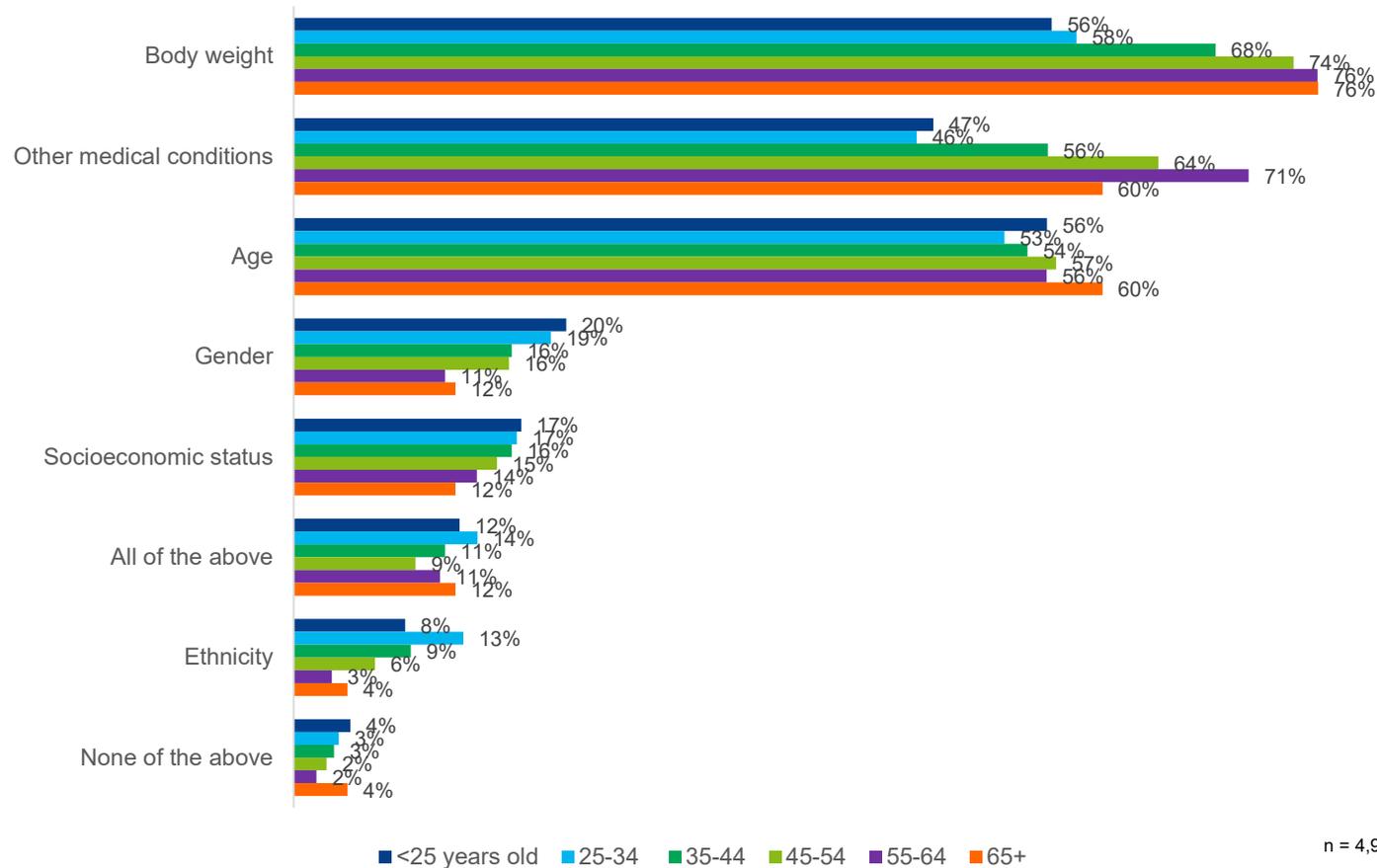


- Women see age and other medical conditions as a greater contribution to someone's risk of developing cardiovascular disease compared to men.

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Body weight and other health conditions top risk factors across age groups

Q15. Which factors do you think contribute most to someone's risk of developing cardiovascular disease? Please select all that apply.

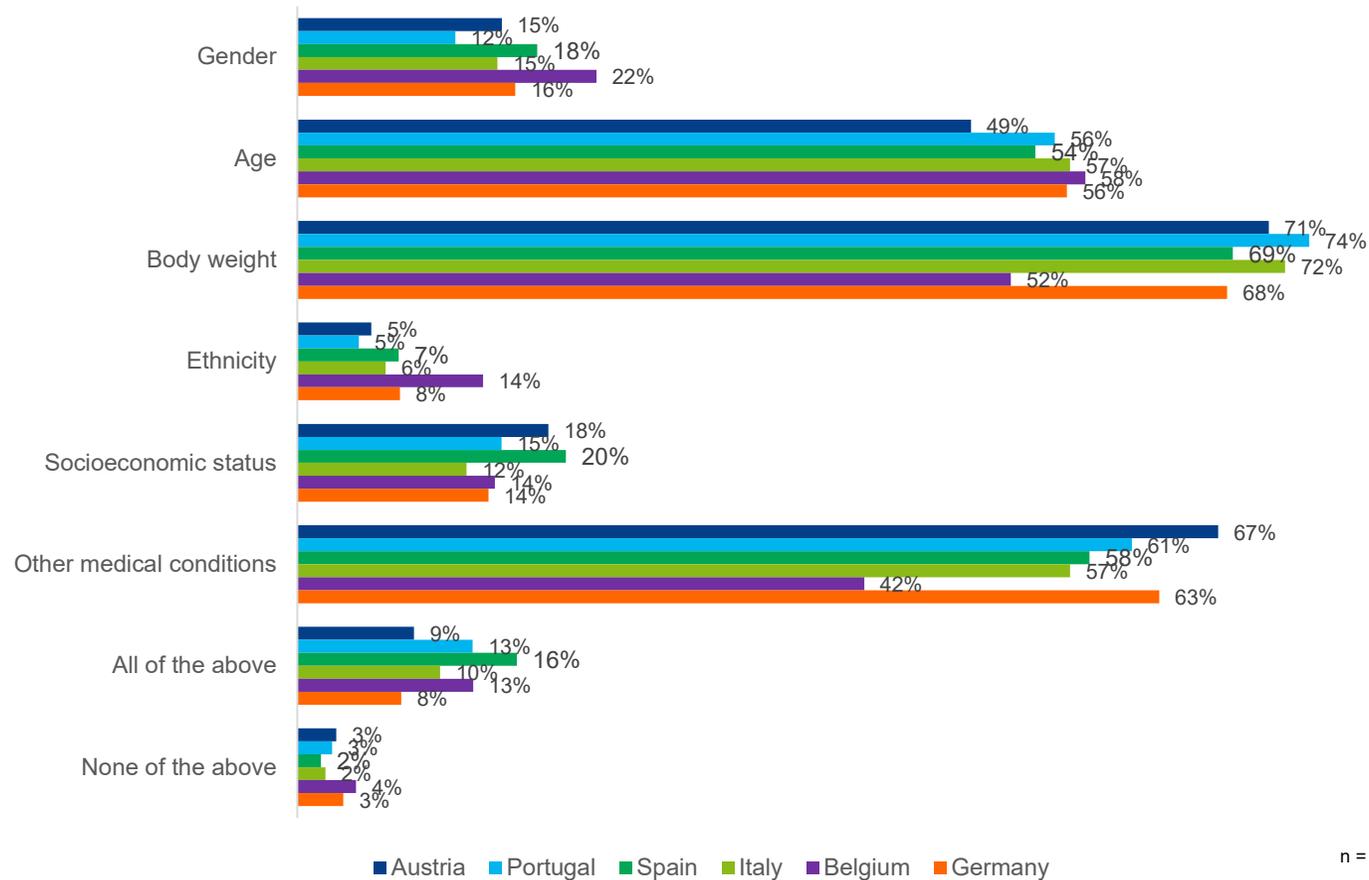


- Body weight is the most cited risk factor (**56%** of <25s up to **78%** of 65+).
- Other medical conditions rank also high, rising from **47%** in <25s to **71%** in 55–64s.
- Age itself is seen as a key contributor (**52%–60%**), while gender and ethnicity remain less recognized (**<20%**).

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Overall countries agreed on the factors that contribute the most to someone's risk of developing cardiovascular disease

Q15. Which factors do you think contribute most to someone's risk of developing cardiovascular disease? Please select all that apply.



- In Belgium, people put more emphasis on gender and ethnicity contributing to cardiovascular disease compared to other countries and less on body weight and other medical conditions.

Thank you